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ABSTRACT

This course of study for the child care aide is one of a series available for use by teacher-coordinators and students in Grade 11 and 12 home economics cooperative education programs. Based on job analysis interviews with child care center personnel, the course was prepared by teacher and Instructional Materials Center staff, field-tested, and revised prior to publication. Intended for teacher use in course planning or for independent study by students, the course outline relates tasks to general objectives and competencies needed to perform effectively on the job. Contents consist of four main sections: Instructional Materials for Students, Answer Sheets for Instructional Materials Study Questions, Unit Tests, and Answer Keys for Unit Tests. Some of the unit topics are: (1) The Child and His Family, (2) The Child in a Child Care Center, (3) Children's Food and Eating Habits, (4) Children's Play: A Learning Experience, (5) Books and Music for Children, (6) Nature and Science Experiences, (7) Toys and Games for Children, (8) Health and Safety, (9) Infant Care, and (10) The Exceptional Child. Most Units include tasks, objectives, references, and assignments, and many are illustrated with line drawings. A bibliography is provided. (AW)

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CHILD CARE AIDE

Materials Prepared
by

Home Economics Instructional Materials Center
Texas Tech University

Issued
by

Texas Tech University
School of Home Economics
Department of
Home Economics Education
Lubbock, Texas

in
cooperation
with

Texas Education Agency
Department of Vocational
and Adult Education
Division of Homemaking Education
Austin, Texas

September, 1969

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
OFFICE OF EDUCATION

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September, 1969

DESCRIPTION OF
HOME ECONOMICS INSTRUCTIONAL MATERIALS CENTER

The Home Economics Instructional Materials Center was established September 1, 1967, as a continuing project. It is a cooperative project between the Division of Homemaking Education, Texas Education Agency and the School of Home Economics, Home Economics Education Department, Texas Tech University at Lubbock, Texas. The purpose of the Center is to develop a variety of instructional materials for use in vocational home economics programs.

An initial Planning Grant Project was approved by the Texas Education Agency for February 1 through August 31, 1967. The major purposes of the Planning Grant Project were (1) to assemble and catalog an occupational reference library, (2) to develop procedural steps for preparation of instructional materials, and (3) to illustrate the first sequence of these steps, that is, to develop job analyses and to list competencies needed for employability of students. This project provided a background of information for the establishment of the Home Economics Instructional Materials Center.

The present major objectives of the Home Economics Instructional Materials Center are (1) to develop a variety of instructional materials designed for use by students enrolled in home economics cooperative education programs and in pre-employment laboratory education programs in preparation for employment in occupations requiring home economics knowledge and skills and (2) to develop such other instructional materials as are needed to meet the changing emphases in other home economics programs.

Acknowledgment is given to:

Miss Louise Keller, former Consultant in Job Training, U.S. Office of Education, who directed the Planning Grant phase of the project.

Miss Rua Van Horn, former Regional Home Economics Supervisor, U.S. Office of Education, who served as consultant during the Planning Grant.

Mrs. Elizabeth Smith, Director, Division of Homemaking Education, Texas Education Agency, and Dr. L. Ann Buntin, former Chairman, Department of Home Economics Education, Texas Tech University, who conceived the original plan for establishing the Center.

Dr. Camille G. Bell, current Chairman, Department of Home Economics Education, and Dr. Willa Vaughn Tinsley, Dean, School of Home Economics, Texas Tech University, who continue to serve in an advisory capacity.

Barbara Clawson, Director
Home Economics Instructional
Materials Center

Thelma Whigham, Assistant Director
Home Economics Instructional
Materials Center

MEMORANDUM

TO: The ERIC Clearinghouse on Vocational and Technical Education
The Ohio State University
980 Kinnear Road
Columbus, Ohio 43212

FROM: (Person) Elizabeth F. Smith (Agency) Director, Homemaking Education, Texas Education Agency

(Address) Capitol Station, Austin, Texas 78711

DATE: November 25, 1969

RE: (Author, Title, Publisher, Date) Home Economics Instructional Materials Center, Child Care Aide, (Revised), September 1969

Supplementary Information on Instructional Material

Provide information below which is not included in the publication. Mark N/A in each blank for which information is not available or not applicable. Mark P when information is included in the publication. See reverse side for further instructions.

(1) Source of Available Copies:
Agency Home Economics Instructional Materials Center (ONLY)
Address P.O. Box 4067, Texas Tech University, Lubbock, Texas 79409
Limitation on Available Copies ______ Price/Unit Teacher's Edition $10.00
Student Edition $6.50

(2) Means Used to Develop Material:
Development Group Advisory committee, experienced teachers, and HEIMC staff
Level of Group State
Method of Design, Testing, and Trial Designed by Center staff following a job survey, tested in 24 schools, revised, and printed.

(3) Utilization of Material:
Appropriate School Setting High school
Type of Program Home economics cooperative education high school class
Occupational Focus Occupational cluster
Geographic Adaptability United States
Uses of Material Course planning (teacher) Independent study (student)
Users of Material Teachers and students

(4) Requirements for Using Material:
Teacher Competency Home Economics teacher
Student Selection Criteria Junior or Senior in high school; male or female; enrolled in home economics gainful employment programs
Time Allotment Varies with individual student--planned for two semesters when supplemented with job orientation information.
Supplemental Media --
Necessary X)
Desirable ___) (Check Which)

Describe A list of required books and pamphlets is included in the Course of Study. Sources and addresses vary for the publications.
Source (agency)
(address)

COURSE OF STUDY
FOR
CHILD CARE AIDE

This Course of Study is one of a series available to assist teacher-coordinators in promoting and/or teaching home economics cooperative education programs. It was used experimentally in twenty-four schools in Texas during 1968. This publication represents a revision based on the information gained from both teacher-coordinators and students in these twenty-four schools through a variety of evaluation instruments. Other Courses of Study in the series are:

- Clothing Assistant
- Dietitian Aide
- Food Service Employee
- Home Furnishings Aide
- Housekeeping Management Assistant

A Course of Study consists of (1) an overview and job description, (2) a job analysis, (3) a course outline, (4) instructional materials for student use, (5) unit tests, and (6) a list of references required for use with the instructional materials.

The Course of Study for Child Care Aide is based on the job analysis included in this set of materials. The job analysis was developed from interviews with employers and/or employees in child care centers. The proposed course outline for teacher use (which grew out of the job analysis) served as a guide for writing the instructional materials for student use. During the process of developing the course outline, advisory committee meetings were held to review and edit the working materials. Experienced home economics cooperative education teacher-coordinators and subject matter specialists aided in writing the student materials.

The job analysis may be used in interviews with employers and/or employees to survey the tasks performed by entry level employees in this occupation in a particular community. Results of the interviews could then be used as a basis for writing the training plans for each student.

The proposed course outline relates the tasks to the general objectives and competencies needed by students to perform effectively on the job. The competencies listed as "abilities" are to be gained primarily from on-the-job training while those listed as "understandings" are to be gained from classroom experiences.

The student instructional materials included as Section A in this Course of Study have been written to provide part of the classroom instruction and are designed to give students an increased understanding of the tasks they perform on the job. This section is also bound separately for student use.

Since students in a given class are employed in a variety of occupations, the instructional materials have been developed in such a manner that they may be used for individual study with a minimum of assistance from the teacher-coordinator. The materials are designed so students may begin with any unit. It is not necessary for them to go through the units in a particular order. They may wish to begin with the units most closely related to their jobs and then go back and study the rest of the information.

Each topic of the instructional materials begins with the task to which the topic is related and a statement of behavioral objectives. For some topics, information sheets are provided and for other topics reading assignments in related texts and pamphlets are made. Study questions and/or assignments follow the information sheet for each topic. The study questions provide an opportunity for the student to check his understanding of the information presented. The teacher-coordinator may wish to check the answers to the questions, or she may suggest that the student check his own work and then turn the work in to her.

Answers to study questions are included in Section B of the Course of Study, but they are not in the separately bound student copy of instructional materials. The special assignments, included with some topics, are also repeated on the answer sheets to remind the teacher-coordinator to check the student's progress in completing them.

Unit tests are provided in Section C and answer keys in Section D of the teacher's copy of the Course of Study. These sections are not included in the separately bound student copy of instructional materials.

Reference materials which are essential for use with the Course of Study are listed on page E-1. Copies of the books and pamphlets listed must be secured and made available for student use. An effort has been made to select references which will adequately cover the materials and provide up-to-date information related to the job.

The sources listed in the complete bibliography following the Course Units were used in developing the entire Course of Study. These materials are not required references for student use.

ACKNOWLEDGEMENTS

This Course of Study for Child Care Aide, prepared by the Home Economics Instructional Materials Center at Texas Tech University, is the result of the combined efforts and ideas of many people, namely:

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Home Economics
Instructional Materials Center
Lubbock, Texas

OVERVIEW

A student who enjoys working with children, has an understanding of human development and relationships, recognizes the worth of all individuals, and possesses wholesome attitudes toward working with others may be interested in preparing for employment as a child care aide. To be successful, the student needs to develop some skill in helping to enrich the lives of children and in assisting the professional staff in a program geared to the various age and ability levels of the children attending the center.

The length of the course for the child care aide is determined by the background, vocational objective, aptitude, and interest of the student. It is recommended that the child care training program be a two year program with the first year including depth study in child development and related topics. This plan would help to minimize the gap between employee qualifications and employer expectations in terms of the abilities that are needed in the daily interaction with children in a center.

Through actual work experience in the home economics cooperative education program, the student develops competencies needed for successful performance on the job. The student assumes the responsibilities of a child care aide under the supervision of a qualified center director. To be employable, students must develop skills and understandings needed to perform the tasks involved in the job. The following tentative job analysis, developed through interviews with directors of child care centers and administrators of training centers for exceptional children, identifies tasks usually performed by a child care aide.

CHILD CARE AIDE

Under the supervision of a professionally trained director or center manager, the child care aide performs tasks such as: helps children accept the child care center and participate in its activities; helps children remove outer garments and put them in designated places; assists in supervising children in eating, resting, and toileting; assumes some responsibility for play and learning experiences of children; helps children develop habits of behavior, cleanliness, health, safety, and housekeeping appropriate for their age group.

At the job entry level, an aide works under supervision performing the less complicated tasks involved in the child care center routines. Once the child care aide has had some experience in establishing rapport with the children and staff, developed some proficiency in handling children during routine periods, and assumed some responsibility in maintaining center schedules, she can usually participate in more of the directed activites involving the children. Through experience and additional training, persons may advance to jobs involving managerial, supervisory, and/or teaching responsibilities.

Home Economics Instructional Material Center
Lubbock, Texas

CHILD CARE AIDE JOB ANALYSIS

(Used in interviews with directors of child care centers)

Name of Center____________________ Date____________________

Interviewee____________________ Interviewer____________________

DIRECTIONS: Please check in the appropriate column the responsibilities you expect an aide to assume when working in your child care center.

A child care aide assumes numerous responsibilities in caring for children in such situations as day care centers, Head Start classes, childrens' homes, and private homes. Working under the direction of a qualified director, she performs the following functions:

	DAILY	OCCASION-ALLY	DOES NOT APPLY	COMMENTS
1. Becomes oriented to the child care center				
2. Learns what is required of a child care aide				
3. Observes policies of center concerning work schedules, absences, and health regulations				
4. Works cooperatively with staff and accepts instruction and guidance from director				
5. Participates in staff planning and evaluating sessions concerned with center policies and program				
6. Helps to evaluate own progress in meeting responsibilities in the center				
7. Follows regularly assigned schedule of responsibilities and assumes other responsibilities as needed				

	DAILY	OCCASION-ALLY	DOES NOT APPLY	COMMENTS
8. Helps to promote parent interest in the center				
9. Helps the children accept the center and participate in its activities				
10. Assists the children in developing a sense of "belonging" in the center				
11. Helps the children learn acceptable behavior patterns				
12. Helps the children learn the established routines of the center				
13. Helps the children become more independent in removing own garments, such as coats and sweaters				
14. Assists the children in developing good housekeeping habits				
15. Assists children with routines, such as toileting, washing hands, and hanging towels after use				
16. Assists in arranging mats on floor for children's rest period				
17. Supervises rest period of children				
18. Helps the children prepare for mealtime				
19. Sets the table for noon meal				
20. Helps the children understand the importance of eating nourishing foods				
21. Helps the children to develop good food habits and table manners				
22. Helps the children to develop positive, acceptable attitudes toward food and eating				
23. Prepares and serves mid-morning and mid-afternoon snacks				
24. Assumes some responsibility, under supervision, for play and learning experiences of children				

	DAILY	OCCASION-ALLY	DOES NOT APPLY	COMMENTS
25. May relieve teachers for short periods, when needed, by reading stories to children, conducting finger plays, and leading songs				
26. Helps prepare and assemble play materials needed by teacher and/or director				
27. Arranges physical environment, under supervision of director, so it is appropriate for play and learning experiences				
28. Helps children with their nature and sceince experiences				
29. Helps maintain safety of the children during rest and play periods				
30. Practices safety procedures by being alert to situations involving hazards to the safety of children				
31. Assists in administering first aid at the center for minor accidents, cuts, and bruises				
32. Observes accepted procedures for reporting signs of illness or discomfort in children				
33. Helps children establish sanitary habits				
34. Feeds infant as directed by parents and supervisor				
35. Checks infants when they cry and determines reason for crying				
36. Changes diapers and other clothing when necessary				
37. Supervises play period				
38. Assists in supervising infants while they sleep				

	DAILY	OCCASION-ALLY	DOES NOT APPLY	COMMENTS
39. Bathes the infant				
40. Follows safety precautions when caring for infants				
41. Recognizes symptoms of illness				
42. Assists in the services provided for exceptional children in educational, institutional, or day care situations				
43. Works with exceptional children and their parents				
44. Works with professional personnel in facilities for exceptional children				
45. Handles certain clerical responsibilities for professional personnel				
46. Reports or records behavioral changes in each child				
47. Assists professional staff in the overall evaluation of the progress of each child				
48. Observes children for special behavior patterns and responses				
49. Maintains discipline to prevent children from harming themselves and others				
50. Assists exceptional children in activities involving motor control, motor coordination, and perceptual motor training				
51. Guides exceptional children in activities involving mental abilities and intellectual-emotional development (educational-psychological needs)				
52. Feeds exceptional children or assists these children with mealtime activities				
53. Directs exceptional children in activities involving language abilities				

	DAILY	OCCASION-ALLY	DOES NOT APPLY	COMMENTS
54. Assists exceptional children with activities involving social skills				
55. Trains exceptional children in self-help skills				

Home Economics Instructional Materials Center
Lubbock, Texas

PROPOSED COURSE OUTLINE FOR CHILD CARE AIDE BASED ON FINDINGS OF JOB ANALYSIS

TASKS PERFORMED AS DETERMINED BY JOB ANALYSIS	COURSE OUTLINE	GENERAL OBJECTIVES The trainee will:
Becomes oriented to the child care center Learns what is required of a child care aide Observes policies of center concerning work schedules, absences, and health regulations	UNIT I - What Is A Child Care Aide	Become aware of tasks, competencies, and opportunities involved in working as a child care aide Recognize employment opportunities in child care service
Works cooperatively with staff and accepts instruction and guidance from director Participates in staff planning and evaluating sessions concerned with center policies and program Helps to evaluate own progress in meeting responsibilities in the center Follows regularly assigned schedule of responsibilities and assumes other responsibilities as needed	UNIT II - Child Care Aide: A Member of the Team	Recognize factors which contribute to successful working relationships with others Assess own personal qualities in relation to job requirements Evaluate self periodically Identify factors involved in planning a satisfactory schedule for pre-school children

TASKS PERFORMED AS DETERMINED BY JOB ANALYSIS	COURSE OUTLINE	GENERAL OBJECTIVES The trainee will:
	UNIT III - The Child and His Family	Recognize the basic needs of young children Describe characteristics of children from two to five Comprehend the principles and areas of development of children Analyze the influence of the family on the growth and development of children
Helps to promote parent interest in the center Helps the children accept the center and participate in its activities Assists the children in developing a sense of "belonging" in the center Helps the children learn acceptable behavior patterns Helps the children learn the established routines of the center Helps the children become more independent in removing own garments, such as coats and sweaters	UNIT IV - The Child in a Child Care Center	Recognize importance of parent-center relationships Identify procedures which will aid children in their adjustment to the center Discover from child's behavior the way he feels in a group situation Analyze own behavior and its effect upon the children Apply principles of guidance based on understanding of behavior

TASKS PERFORMED AS DETERMINED BY JOB ANALYSIS	COURSE OUTLINE	GENERAL OBJECTIVES The trainee will:
Assists the children in developing good housekeeping habits Assists children with routines, such as toileting, washing hands, and hanging towels after use Assists in arranging mats on floor for children's rest period Supervises rest period of children		Describe techniques of helping children gain self-reliance in performance of routine activities
Helps the children prepare for mealtime Sets the table for noon meal Helps the children understand the importance of eating nourishing foods Helps the children to develop good food habits and table manners Helps the children to develop positive, acceptable attitudes toward food and eating	UNIT V - Children's Food and Eating Habits	Relate appearance of food and table to acceptance of food Recognize necessity of guiding children in the establishment of wholesome food habits Identify environmental factors which influence eating habits of children Describe procedures to follow when supervising mealtime activities

TASKS PERFORMED AS DETERMINED BY JOB ANALYSIS	COURSE OUTLINE	GENERAL OBJECTIVES The trainee will:
Prepares and serves mid-morning and mid-afternoon snacks		
Assumes some responsibility, under supervision, for play and learning experiences of children	UNIT VI - Children's Play - A Learning Experience	Plan play and learning experiences for children which will promote their mental, social, emotional, and physical development
May relieve teachers for short periods, when needed, by reading stories to children, conducting finger plays, and leading songs	UNIT VII - Books and Music for Children	Recognize contributions of books and music to child's development Become adept in guiding story telling and musical activities
Helps prepare and assemble play materials needed by teacher and/or director Arranges physical environment, under supervision of director, so it is appropriate for play and learning experiences	UNIT VIII - Toys and Games for Children	Analyze play equipment in relation to contribution it makes to child's development Plan procedures for directing children's games Evaluate toys and play equipment in terms of suitability of use by children
Helps children with their nature and science experiences	UNIT IX - Nature and Science Experiences	Develop attitudes which will promote children's interest in their environment

TASKS PERFORMED AS DETERMINED BY JOB ANALYSIS	COURSE OUTLINE	GENERAL OBJECTIVES The trainee will:
		Plan science activities which will aid children in concept development
Helps to maintain safety of the children during rest and play periods	UNIT X - Health and Safety	Recognize importance of observing safety practices in the child care center and being alert to safety hazards
Practices safety procedures by being alert to situations involving hazards to the safety of children		Identify proper first aid practices and know limits of aid which can be administered
Assists in administering first aid at the center for minor accidents, cuts, and bruises		Describe symptoms of illness which may appear in children
Observes accepted procedures for reporting signs of illness or discomfort in children		Recognize necessity of observing center and local health policies and sanitation regulations
Helps children establish sanitary habits		Plan activities which will aid children in forming safety habits and good health habits
Feeds infant as directed by parents and supervisor	UNIT XI - Infant Care	Recognize characteristics and needs of infants

TASKS PERFORMED AS DETERMINED BY JOB ANALYSIS	COURSE OUTLINE	GENERAL OBJECTIVES The trainee will:
Checks infants when they cry and determines reason for crying Changes diapers and other clothing when necessary Supervises play period Assists in supervising infants when they sleep Bathes the infant Follows safety precautions when caring for infants Recognizes symptoms of illness		Describe methods to use in caring for infants
Assists in the services provided for exceptional children in educational, institutional, or day care situations Works with exceptional children and their parents Works with professional personnel in facilities for exceptional children Handles certain clerical responsibilities	UNIT XII - The Exceptional Child	Recognize the kinds of challenges that special education provides for the child care aide Identify basic similarities in the care and training of "normal" and exceptional children Determine appropriate techniques in supervising and caring for exceptional children

TASKS PERFORMED AS DETERMINED BY JOB ANALYSIS	COURSE OUTLINE	GENERAL OBJECTIVES The trainee will:
Reports or records behavioral changes in each child		
Assists professional staff in the overall evaluation of the progress of each child		
Observes children for special behavior patterns and responses		
Maintains discipline to prevent children from harming themselves and others		
Assists exceptional children in activities involving motor control, motor coordination, and perceptual motor training		
Guides exceptional children in activities involving mental abilities and intellectual-emotional development		
Feeds exceptional children or assists these children with mealtime activities		

TASKS PERFORMED AS DETERMINED BY JOB ANALYSIS	COURSE OUTLINE	GENERAL OBJECTIVES The trainee will:
Directs exceptional children in activities involving language abilities		
Assists exceptional children with activities involving social skills		
Trains exceptional children in self-help skills		

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COURSE UNIT I

WHAT IS A CHILD CARE AIDE?

OBJECTIVES: Become aware of tasks, competencies, and opportunities in working as a child care aide

Recognize employment opportunities in child care services

TASKS	COMPETENCIES NEEDED TO PERFORM TASKS IN TERMS OF	
	ABILITY TO:	UNDERSTANDING OF:
Becomes oriented to the child care center	List purposes and nature of the child care center in the community	Purposes and objectives of child care centers Reasons parents send children to child care centers Purposes and eligibility requirements of organizations related to child care and training Different types of child care centers Characteristics of an approved child care center

UNIT I (Continued)

TASKS	ABILITY TO:	UNDERSTANDING OF:
Learns what is required of a child care aide		State and local regulations which influence center policies and program activities
		Responsibilities assigned to child care aides
	Analyze employment opportunities and training needs	Employment opportunities for trained workers in child care
		Need for trained personnel in positions related to child care services
	Evaluate own personal qualities in relation to desirable characteristics of persons working as child care aides	Personal characteristics which are desirable in those who work with children, such as being dependable, remaining calm in emergencies, and finding satisfaction in working with young children
Observes policies of center concerning work schedules, absences, and health regulations	Accept and follow policies of center program	Necessity for following regulations specified by center

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COURSE UNIT II

CHILD CARE AIDE - A MEMBER OF THE TEAM

OBJECTIVES: Recognize factors which contribute to successful working relationships with others

Assess own personal qualities in relation to job requirement

Evaluate self periodically

Identify factors involved in planning a satisfactory schedule for pre-school children

TASKS	COMPETENCIES NEEDED TO PERFORM TASKS IN TERMS OF	
	ABILITY TO:	UNDERSTANDING OF:
Works cooperatively with staff and accepts instruction and guidance from director	Work under supervision and follow directions effectively	Importance of guidance from director in helping aide assume her role in the center Necessity for teamwork and cooperation among members of center staff Influence of behavior and attitudes of adults on the behavior of children

TASKS	ABILITY TO:	UNDERSTANDING OF:
		Relationship between self-understanding and understanding others
		Ethical principles involved in working with children and staff at the center
Participates in staff planning and evaluating sessions concerned with center policies	Communicate with staff members in planning sessions	Importance of group planning sessions in the over-all functioning of the center
		Topics to be discussed at planning sessions
Helps to evaluate own progress in meeting responsibilities in the center	Evaluate own personal qualities, job requirements, and performance	Need for self-evaluation of job performance
		How to use results of self-evaluation to improve job performance
Follows regularly assigned schedule of responsibilities and assumes other responsibilities as needed	Work with children and staff in job duties beyond giving and receiving instructions	Importance of assuming assigned responsibilities and contributing to the center program
	Help maintain daily routines and activities	Importance of schedule and routines to the center activities
		Types of opportunities for learning which should be provided in a daily work schedule at a child care center

UNIT II (Continued)

TASKS	ABILITY TO:	UNDERSTANDING OF:
		Factors to consider when planning a daily schedule of activities for a child care center

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COURSE UNIT III

THE CHILD AND HIS FAMILY

OBJECTIVES:

- Recognize the basic needs of young children
- Describe characteristics of children from two to five
- Comprehend the principles and areas of development of children
- Analyze the influence of the family on the growth and development of children

TASKS	COMPETENCIES NEEDED TO PERFORM TASKS IN TERMS OF	
	ABILITY TO:	UNDERSTANDING OF:
	Help create comfortable environment for children and help them feel secure and self-confident	The family life cycle Influence of family environment on development of child The basic needs Difference between growth and development Principles of development

UNIT III (Continued)

TASKS	ABILITY TO:	UNDERSTANDING OF:
		Characteristics of children from two to five
	Help children find a place within the group	Areas of development--motor, social, emotional, intellectual, and moral

COURSE UNIT IV

THE CHILD IN A CHILD CARE CENTER

OBJECTIVES: Recognize importance of parent-center relationships

Identify procedures which will aid children in their adjustment to the center

Discover from child's behavior the way he feels in a group situation

Analyze own behavior and its effect upon children

Apply principles of guidance bases on understanding of behavior

Describe techniques of helping children gain self-reliance in performance of routine activities

TASKS	COMPETENCIES NEEDED TO PERFORM TASKS IN TERMS OF	
	ABILITY TO:	UNDERSTANDING OF:
Helps to promote parent interest in center	Relate well to parents	Importance of interaction between parents and staff members Factors to consider when evaluating parent-center relationships

UNIT IV (Continued)

TASKS	ABILITY TO:	UNDERSTANDING OF:
Helps the children accept the center and participate in its	Cultivate sensitivity to child's feelings about the center	Variety of ways children adjust to new experiences
	Accept and welcome each child to center as he is, recognizing individual worth and dignity	Procedures to be followed in receiving children and intergrating them into center activities
	Help each child accept the absence of parents	Significance of the activities included in the center program
	Encourage children to express feelings and become interested in center activities	Children's normal feelings of inadequacy in new situations
	Encourage and develop children's curiosity, problem-solving ability, and zest for living	Relation of center experiences to the growth and development neess of children
	Develop happy relationship with children (rapport)	Ways in which basic needs of children can be met at center
Assists the children in developing a sense of "belonging" in the center	Establish and maintain child's sense of self-pride, self-worth, and self-satisfaction	Behavior which will contribute to a child's feelings of adequacy and security
	Help children find a place within the group	Ways to help child become a part of the group
Helps the children learn acceptable behavior patterns	Use center-approved principles of guidance while working with children	Guidance practices used by the center
		Goals of discipline

UNIT IV (Continued)

TASKS	ABILITY TO:	UNDERSTANDING OF:
		Ways of working with children and maintaining discipline
	Discriminate between acceptable and unacceptable behavior patterns	Factors influencing behavior patterns of children
		Acceptable behavior patterns of children
	Observe and interpret behavior of children objectively	How to recognize unusual behavior or discipline problems
	Discuss unusual behavior with director	Appropriate procedure to follow when unusual behavior is observed
Helps the children learn the established routines of the center	Help maintain daily routines in activities of the children	Relation of routines to child's development habits
Helps the children become more independent in removing own garments, such as coats and sweaters	Stimulate independence in children	Need for children to develop independence in simple self-help tasks appropriate at their age level
		Ways of helping children help themselves

UNIT IV (Continued)

TASKS	ABILITY TO:	UNDERSTANDING OF:
Assists children developing good housekeeping habits	Guide the children toward good habits, useful skills, wholesome attitudes, self-reliance, and independence	Responsibilities that children are capable of accepting at this age level
		Appropriate times for offering assistance or encouraging independence in children
	Set a good example for children to follow in housekeeping practices	Values of good housekeeping habits
	Stimulate interest on the part of the children in helping to keep center neat, for example, discarding napkins after eating, flushing commode after toileting	Need for children to be included in housekeeping activities of center
Assists children with routines, such as toileting, washing hands, and hanging towels after use	Accept children's interest in each other at toilet time	Influence of adult attitudes and standards in promoting healthy adjustment of children in terms of toilet training
Assists in arranging mats on floor for children's rest period	Prepare room for rest period of children	Ways to provide for rest and sleep needs of children in the center
Supervises rest period of children	Keep a sleep chart for each child	Amount of rest and sleep children need
	Help children prepare for "nap time"	Importance of quiet play before children's rest period

UNIT IV (Continued)

TASKS	ABILITY TO:	UNDERSTANDING OF:
	Provide the proper atmosphere and controls for rest period	Effective methods of preparing children for their rest period
	Recognize symptoms of fatigue	Symptoms of fatigue

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COURSE UNIT V

CHILDREN'S FOOD AND EATING HABITS

OBJECTIVES: Recognize necessity of guiding children in the establishment of wholesome food habits

Identify environmental factors which influence eating habits of children

Describe procedures to follow when supervising mealtime aciivities

TASKS	COMPETENCIES NEEDED TO PERFORM TASKS IN TERMS OF	
	ABILITY TO:	UNDERSTANDING OF:
Helps the children prepare for mealtime	Encourage children to wash hands before meals	Importance of quiet play before mealtime
		Types of play suitable prior to mealtime
		Importance of personal cleanliness are related to food and eating
Sets the table for noon meal	Set table correctly for menu	Method of setting an attractive table
	Arrange tables and chairs to insure comfort while the children are eating	Effect of environmental influences on the mealtime situation

TASKS	ABILITY TO:	UNDERSTANDING OF:
	Arrange attractive and appropriate table decorations	
	Help children plan and make table decorations for special occasions	Importance of creative expression in children
Helps the children understand the importance of eating nourishing foods	Recognize kinds and amounts of food which meet nutritional needs of the children in the center	Nutritional needs of children
Helps the children develop good food habits and table manners	Accept eating practices--handling of silver and food--appropriate for children's ages	Desirable eating habits and basic etiquette appropriate for age level of the children
	Handle situations when children refuse some foods	Reasons children may refuse to eat and how to deal with this situation
	Set the stage for encouraging children to try new foods	Effective methods of introducing new foods to children
	Show children how to use eating equipment and handle foods when eating	Children's need for assistance in developing good food habits
	Guide children toward more independent eating practices	Importance of patience in guiding eating practices of children
	Encourage self-help in eating	

UNIT V (Continued)

TASKS	ABILITY TO:	UNDERSTANDING OF:
Helps the children to develop positive, acceptable attitudes toward food and eating	Set good example when eating with the children to encourage and reinforce positive attitudes toward food	Influence of adult attitudes on children's food acceptance
	Enjoy participating in snack and/or mealtime with the children	The relationship between the way a child feels and his eating habits
	Make snack and/or mealtime a pleasant occasion	Ways to insure pleasant mealtime experiences for children
	Help children to enjoy quiet conversation while eating	Importance of guiding children's conversation and activities during snack and/or mealtime
	Ignore some eating habits of children by giving attention and recognition in other ways	Basic emotional and social needs of children as expressed in their attitudes toward eating
Prepares and serves mid-morning and mid-afternoon snacks	Set the stage for snack time	Purpose of snacks for pre-school children
	Prepare snacks attractively for serving to the children	Typical snack foods that are appropriate and liked by children
	Serve snacks to the children	Sanitary methods of preparing and serving snacks

UNIT V (Continued

TASKS	ABILITY TO:	UNDERSTANDING OF:
		Ways to encourage children to eat snacks provided for them

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COURSE UNIT VI

CHILDREN'S PLAY--A LEARNING EXPERIENCE

OBJECTIVE: Plan play and learning experiences for children which will promote their mental, social, emotional, and physical development

	COMPETENCIES NEEDED TO PERFORM TASKS IN TERMS OF	
TASKS	ABILITY TO:	UNDERSTANDING OF:
Assumes some responsibility, under supervision, for play and learning experiences of children	Guide children in playing happily with others	How children learn and develop through play (value of play)
	Help children find satisfaction in constructive play	Role of play in the total growth process
	Show children acceptable ways to behave in play activities--sharing, etc.	Types of play and play activities
		Contributions different types of play make to the child's development
	Encourage both individual and cooperative play	Stages of development in play--solitary, parallel, etc.
	Help children select and use play materials and equipment with	Ways of guiding children in safe, but constructive, play

UNIT VI (Continued)

TASKS	ABILITY TO:	UNDERSTANDING OF:
	courage, safety, and skill, keeping rules of play to a minimum	
	Control play and learning situations to reduce emotional behavior problems	Individual differences in motor and social development of children which affect their play activities
	Respect individual differences and not expect equal performance from all children	

COURSE UNIT VII

BOOKS AND MUSIC FOR CHILDREN

OBJECTIVES: Recognize contribution of books and music to child's development

Become adept in guiding story telling and musical activities

TASKS	COMPETENCIES NEEDED TO PERFORM TASKS IN TERMS OF	
	ABILITY TO:	UNDERSTANDING OF:
May relieve teachers, when needed, by reading stories to children, conducting finger plays and leading songs	Suggest suitable books and stories of interest to a group of children	Importance of stories, music, and finger plays in mental, physical, emotional, and social development of children
		Suitable books for children of different ages
		Criteria to use for evaluation of children's books
	Read or tell stories with animation and expression encouraging participation of children	Techniques of story telling
	Draw pictures of story characters and/or let children draw pictures when telling stories	Visual aids to use during story telling

TASKS	ABILITY TO:	UNDERSTANDING OF:
	Help children learn to listen and to participate in group activities	Techniques for meeting needs of children in group activities
	Watch for clues of fatigue, lack of interest, or over-stimulation	Clues which indicate interest and/or response of children to the story
	Select appropriate songs and singing games	Songs and rhythm activities appropriate for children of various ages
	Lead songs and singing games	Rhythm instruments which can be easily made
		Procedures to follow when directing musical activities
		Developmental sequences for music activities

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COURSE UNIT VIII

TOYS AND GAMES FOR CHILDREN

OBJECTIVES: Analyze play equipment in relation to contribution it makes to child's development

Plan procedures for directing children's games

Evaluate toys and play equipment in terms of suitability of use by children

TASKS	COMPETENCIES NEEDED TO PERFORM TASKS IN TERMS OF	
	ABILITY TO:	UNDERSTANDING OF:
Helps prepare and assemble play materials needed by teacher and/or director	Make some judgments in selecting and preparing materials for children's activities	Play materials which are most popular with children at different ages
	Organize play materials for most effective use by the teacher	Kinds of play materials which contribute to the intellectual, physical, social, and emotional development of children
	Improvise play materials from inexpensive articles	Playthings which can be made
Arranges physical environment, under supervision of director, appropriate for play and learning experiences	Use and care for materials and equipment needed in play activities and learning experiences	Kinds of materials and equipment available for use in the different areas of the center

UNIT VIII (Continued)

TASKS	ABILITY TO:	UNDERSTANDING OF:
		Play activities and games appropriate for children at the center
	Select appropriate toys for children	Criteria for evaluation of play equipment and toys
	Lead children's games	Techniques to follow when directing children's games
		Games appropriate for young children

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COURSE UNIT IX

NATURE AND SCIENCE ACTIVITIES

OBJECTIVES: Develop attitudes which will promote children's interest in their environment

Plan science activities which will aide children in concept development

	COMPETENCIES NEEDED TO PERFORM TASKS IN TERMS OF	
TASKS	ABILITY TO:	UNDERSTANDING OF:
Helps children with their nature and science experiences	Assist children in developing more interests and understandings of the world around them	Children's need to explore and investigate their environment Adult attitudes which will promote children's interest in their environment
	Help children care for a fish aquarium, baby turtles, or small pets	
	Show children how to plant and care for seeds, flowers, and small vegetables	Appropriate nature and science activities

UNIT IX (Continued)

TASKS	ABILITY TO:	UNDERSTANDING OF:
	Let the children actually participate in the nature and science experiences rather than doing the tasks for them	Procedures to observe when directing nature and science experiences for children
	Help children develop concepts of objects and words related to the world around them	Concepts children are capable of forming

COURSE UNIT X

HEALTH AND SAFETY

OBJECTIVES: Recognize importance of observing safety practices in the child care center and being alert to safety hazards

Identify proper first aid practices and know limits of aid which can be administered

Describe symptoms of illness which may appear in the children

Recognize necessity of observing center and local health policies and sanitation regulations

Plan activities which will aid children in forming safety habits and good health habits

TASKS	COMPETENCIES NEEDED TO PERFORM TASKS IN TERMS OF	
	ABILITY TO:	UNDERSTANDING OF:
Helps to maintain safety of the children during rest and play periods	Maintain discipline to help insure safety of the children	Causes of accidents Importance of discipline in preventing avoidable accidents
	Encourage safety habits in handling play materials and equipment	Safety precautions to be employed during play activities and routine periods

UNIT X (Continued)

TASKS	ABILITY TO:	UNDERSTANDING OF:
	Give close supervision to children during rest and play periods	
Practices safety procedures by being alert to situations involving hazards to the safety of children	Observe and remove sources of danger, such as protruding nails, unsteady boards not properly supported	Importance of foreseeing and avoiding hazardous situations
	Keep the center orderly and safe	Need to inform director of the center concerning problems, such as play equipment hazards, maintenance needs
	Remain calm when accidents occur	Procedure to follow when an accident occurs
		Activities which can be used to teach safety practices
Assists in administering first aid at the center for minor accidents, cuts, and bruises	Apply medication to minor cuts and bruises	Proper methods of first aid treatment for minor accidents
	Handle minor emergencies calmly and intelligently	
Observes procedures for reporting signs of illness or discomfort in children	Recognize and report early signs of illness or discomfort in children	Characteristic symptoms of illness or discomfort
		Common diseases of children
		Policies established by the center in relation to care of the children

UNIT X (Continued)

TASKS	ABILITY TO:	UNDERSTANDING OF:
Helps children establish sanitary habits	Follow center-approved health measures in working with children	Sanitation practices which contribute to physical health of children
	Help children develop good health habits, such as washing hands after toileting and before eating; keeping objects out of mouth, covering mouth when coughing or sneezing	Reasons for maintaining good health habits and how to help children develop them
		Contributions personal cleanliness makes to child's physical well-being
	Provide an environment that encourages cleanliness and healthful habits	Importance of maintaining healthful surroundings
		Activities which will help children reach health goals
	Set a good example by practicing good health habits	Child care aide's contribution to the physical health of the children in the center through setting a good example

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COURSE UNIT XI

INFANT CARE

OBJECTIVES: Recognize characteristics and needs of infants

Describe methods to use in caring for infants

TASKS	COMPETENCIES NEEDED TO PERFORM TASKS IN TERMS OF	
	ABILITY TO:	UNDERSTANDING OF:
		Characteristics of infants physical emotional social intellectual
Feeds infant as directed by parents and supervisor	Feed infant on schedule provided by parents	Importance of following feeding schedules provided by parents
		Ways of helping infant adjust to a feeding schedule
		Typical feeding schedules
	Follow accepted procedures when bottle feeding infants	Procedures to follow when bottle feeding

UNIT XI (Continued)

TASKS	ABILITY TO:	UNDERSTANDING OF:
	Accept behavior of infant as he learns to eat solid foods	Stages of development in learning to eat solid foods
		Normal behavior when solid foods are introduced in infants diet
	Help infants accept and learn to eat solid foods	Procedures to follow when feeding solid foods to infant
		Importance of allowing infant to begin to feed himself when he is ready
	Feeds infant in a calm, assured manner	Relationship between behavior of adult during feeding and attitudes toward feeding formed by infant
Checks infants when they cry and determines reason for crying		Crying as an infant's method of communication
	Interpret reason infant cries nad handle situation accordingly	How to interpret meanings of different kinds of crying and behavior
Changes diapers and other clothing when necessary		Types of diapers
		Ways of folding diapers
	Change diapers following procedure recommended at center	Procedure to follow when changing ciapers

UNIT XI (Continued)

TASKS	ABILITY TO:	UNDERSTANDING OF:
Supervises play period		Role of play in infant's development
	Guide play activities of infants	Typical play activities during the first year
	Evaluate toys in terms of safety features	Criteria to consider in selection of toys for infants
	Provide objects for the infants' environment that will aid their development	Contribution of stimulating environment to infant's development
Assists in supervising infants while they sleep		Sleeping schedule for infants of different ages
		Positions in which infants sleep and advantages of certain positions
	Select appropriate activities for infants prior to going to sleep	Procedures for preparing infant for sleep
	Supervise sleeping periods of infants	Conditions conducive to sleep

UNIT XI (Continued)

TASKS	ABILITY TO:	UNDERSTANDING OF:
Bathes the infant	Bathe infants following safe, accepted procedures	Procedures to follow when bathing an infant
Follows safety precautions when caring for infants		Necessity of constant alertness to potential safety hazards
	Keeps infants safe during activities throughout the day	Safety precautions to observe during the following activities of infants: bathing, sleeping, diapering, feeding, and playing
Recognizes symptoms of illness	Recognize symptoms of illness and report these to supervisor	Symptoms of illness in infants Policy to observe when symptoms are noticed
	Take an infant's temperature	Procedures for taking an infant's temperature Characteristics of a healthy infant

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COURSE UNIT XII

THE EXCEPTIONAL CHILD

OBJECTIVES:

- Recognize the kinds of challenges which special education provides the child care aide
- Identify basic similarities in the care and training of "normal" and exceptional children
- Determine appropriate techniques in supervising and caring for exceptional children

TASKS	COMPETENCIES NEEDED TO PERFORM TASKS IN TERMS OF	
	ABILITY TO:	UNDERSTANDING OF:
Assists in the services provided for exceptional children in educational, institutional, or day care situations	Promote the program of services for exceptional children	Different types of services and facilities, public and private, for exceptional children Objectives of respective programs or facilities
	Identify major problem areas in the development of exceptional children	Types of exceptional children generally found in these settings Known causes of mental retardation Levels of retardation and care needed by each level

UNIT XII (Continued)

TASKS	ABILITY TO:	UNDERSTANDING OF:
		General characteristics of the mentally retarded
		Selected clinical types of mental retardation and disorders associated with mental retardation
Works with exceptional children and their parents	Communicate with exceptional children and their parents	Skills and attitudes needed to work with exceptional children and their parents
		Techniques for dealing with parents and/or families of exceptional children
Works with professional personnel in facilities for exceptional children	Translate directions of professional personnel into action in absence of these professionals	Role of sub-professional personnel in relation to this program and/or facility
Handles certain clerical responsibilities for professional personnel	Transmit information to professional personnel with regard to the exceptional child and his parents	Responsibilities of sub-professionals to professional personnel
		Ethical behavior and importance of confidential information
Reports or records behavioral changes in each child	Maintain adequate records on each child	Methods to use in recording children's behavior
Assists professional staff in the overall evaluation of the progress of each child	Evaluate progress of each child in relation to desired goals	Need for continuing evaluation of children in the particular program of the facility

UNIT XII (Continued)

TASKS	ABILITY TO:	UNDERSTANDING OF:
Observes children for special behavior patterns and responses	Reinforce desired behavior in a positive way	Typical behavior patterns and defense mechanisms Similarities in basic needs of retarded and "normal" children Special needs of retarded children
Maintains discipline to prevent children from harming themselves and others	Guide children in ways which promote development of accept able behavior patterns	Special techniques of guidance and discipline to use when shaping behavior patterns of exceptional children
Assists exceptional children in activities involving motor control, motor coordination, and perceptual motor training	Plan and direct various types of motor activities for exceptional children	Games, art and crafts, and recreational activities for exceptional children
Guides exceptional children in activities involving mental abilities and intellectual-emotional development	Direct various types of planned activities	Appropriate story-time, music, and science activities
Feeds exceptional children or assists these children with mealtime activities	Show children with limited ability how to eat properly	Eating habits and basic etiquette to be expected of exceptional children

UNIT XII (Contineed)

TASKS	ABILITY TO:	UNDERSTANDING OF:
Directs exceptional children in activities involving language abilities	Encourage the child's development of language ability	Guidelines to follow when directing activities involving language abilities
Assists with exceptional children's activities involving social skills	Teach appropriate social behavior	Techniques to follow when directing activities involving social skills
Trains exceptional children in self-help skills	Observe educational techniques and safety practices when working with children	Procedures to follow when helping children with toileting and dressing
		Basic home nursing procedures for non-ambulatory individual

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JOB ANAYLSES AT THREE COMPETENCY LEVELS
IN THE FIELD OF CHILD CARE SERVICES

SEMI-SKILLED OR ENTRY LEVEL	SKILLED LEVEL	ADVANCED LEVEL*
Helps children put on coats, sweaters and other garments for outdoor play	Helps children accept center and participate in its activities	Receives children when they arrive at the center
Helps children remove coats and store them in designated places	Helps children learn established routines of the center	Participates in planning center program and in supervising center personnel
Assists teacher in preparing and arranging play materials and equipment	Assists in supervising children at mealtime, during rest periods and other routine periods	May relieve teacher and/or director for short periods, as needed
Assumes limited responsibility for playground activities, under supervision	Assumes some responsibility, under supervision, for play and learning experiences of children	Sets up schedules for the day with supervision
May help prepare and serve mid-morning and mid-afternoon snacks	Prepares and serves mid-morning and mid-afternoon snacks	Assumes responsibilities for play and learning experiences of children
Helps children with toileting routines	Helps prepare children and room for noon meal	Assists director in securing medical services away from center and in administering medications to the children as provided by parents
Assists in preparing sleep mats for rest period	Helps children develop good eating, housekeeping, playing and toileting habits	Assumes some responsibilities for working with parents

SEMI-SKILLED OR ENTRY LEVEL	SKILLED LEVEL	ADVANCED LEVEL*
Helps keep center orderly and clean	Assists in maintaining health and safety of children in the center	Observes behavior of children and discusses unusual behavior with the director
Follows regularly assigned schedule of responsibilities	Relieves the teacher, as needed, in planned group activities	Directs and guides behavior of children and helps solve discipline problems
	Assists director in administering first aid for minor cuts and bruises	Helps to keep center records on children's progress
	Participates in staff planning and evaluating sessions concerning center policies and her own responsibilities	Participates in staff planning meetings and in self-evaluation sessions
	Follows regularly assigned schedule of responsibilities and assumes other responsibilities as needed	

RECOMMENDED TITLES FOR WORKERS AT EACH COMPETENCY LEVEL

Child Care Helper or Aide	Child Care Assistant	Child Care Supervisor or Assistant Director

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* Advanced level may be equivalent to technical or semi-professional level; student may qualify for Associate degree when completing two years program beyond high school.

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INSTRUCTIONAL MATERIALS
FOR
STUDENTS

Home Economics
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Lubbock, Texas

WHAT IS A COURSE OF STUDY?

INTRODUCTION TO STUDENTS

Betsy: What's this new Course of Study we're going to be using in our HECE (Home Economics Cooperative Education) class all about? The cover looks great, but I don't know about what's inside.

Kathy: I think it's going to be a big help to us both in class and on our jobs. We'll use it in class on the days when we're supposed to study about our particular jobs.

Betsy: That should help, I guess. What do we do--start at the beginning and go clear through it?

Kathy: Not necessarily. It's divided into units and topics related to tasks we might perform on our jobs. After going through the first unit we can skip to any unit we want to that has something to do with our job.

Betsy: You mean I don't have to go through all of it? That sounds great!

Kathy: Well, since jobs vary so much and the authors tried to include information for different kinds of jobs, there may be some units that won't apply to us right now. But I think it helps to know what else is going on where we work or what some of the other job opportunities are. The more we know, the more successful we'll be on our jobs and the better chance we'll have to get a job somewhere else if we move away from here.

Betsy: I suppose you're right about that. Besides, I noticed some units, like the one on play that would apply in one way or another to everyone employed as a child care aide.

Now I have another question. I saw references listed at the beginning of some of the topics. Do we have to read those? Isn't the same information in the Course of Study?

Kathy: No, the references include different information so it's important that we read them as well as what's in the Course of Study. I know it's a bother to get the references sometimes, but there would be no point in putting something in the Course of Study that was already in print. Besides, I've found some information that wasn't assigned in the references that was helpful to me.

Betsy: I saw questions at the end of each topic, but assignments only after some topics. What's the difference? They both sound like work to me.

Kathy: The questions are to help us see if we understand what we've read, while the assignments give us a chance to apply what we've read to our jobs. The assignments help us see how the things we've learned relate to what we do. There's no right or wrong answer to an assignment--what we do is left up to us. Any more questions?

Betsy: Not right now. I want to do well on my job and I think this Course of Study will help me. I'm ready to get started on Unit I, and then I think I'll try the Unit on feeding children.

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UNIT I-1

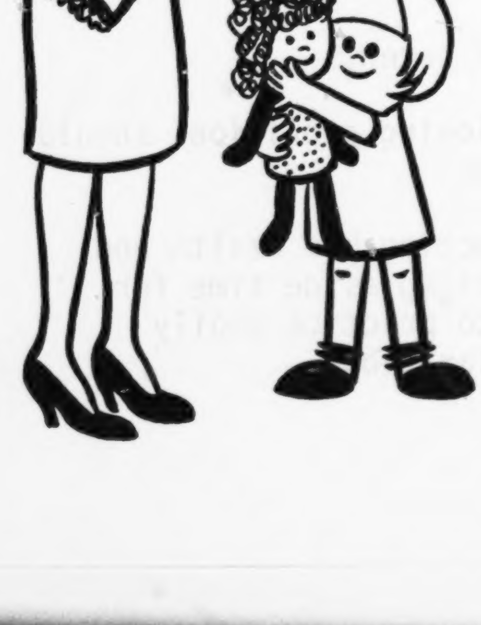
WHAT IS A CHILD CARE AIDE?

SUBJECT: Babysitter or Teacher?

TASK: Becomes oriented to child care center

OBJECTIVES: Be able to
(1) explain the purposes and objectives of child care centers
(2) list basic needs of children
(3) interpret reasons parents send children to child care centers
(4) recognize purposes and eligibility requirements of organizations related to child care and training
(5) identify types of child care services available in their community

REFERENCE: Leeper, Sarah Hammond, Ruth J. Dales, Dora Sikes Skipper and Ralph L. Witherspoon. Good Schools for Young Children. New York: The Macmillan Company, 1968. pp. 77-94; 108-112.



PURPOSES OF THE CHILD CARE CENTER

Changes in our culture have increased the need for child care centers. More mothers are employed outside the home than ever before in history. Many families are now living in apartments, mobile homes, and housing complexes, all of which have limited play space for children. Still another change in our culture is the mobility of young families which results in isolation of those families from relatives and friends of long standing. Consequently, traditional child care resources, such as grandparents, relatives, and older brothers and sisters, are lacking.

Child care centers sometimes provide opportunities for professional counseling related to family problems which may or may not include plans for care of the child. Opportunities for family life education through group meetings and individual counseling also may be provided by some child care centers.

Parents generally send their children to a child care center because it provides:

Supervised play with space and equipment for vigorous exercise to help in physical development

Opportunities to develop manipulative skills using equipment and materials suitable to the child's size and age

Creative experiences that help stimulate the child's independent thinking and intellectual development

A pleasant association with adults to promote respect for authority

Group experiences to develop acceptable social skills

An environment conducive to the happy emotional development of children

Good physical care and responsible supervision

Child care centers are established on sound principles and appropriate standards of "good living" for children. The basic operation of a child care center should be planned to meet the needs common to all children. These needs are:

To be loved and wanted

To have physical care and supervision

To feel secure and protected from anxiety and fears in any emergency

To become independent

To grow, develop, and achieve as an individual

To learn, explore, and experiment through play and play activities

To gain approval, feel significant, and be accepted by peers and adults

To respect the image of authority--teachers and parents

In order to meet the needs outlined above, the following provisions should be made to help children develop in these four areas:

* Physical development and well-being by protecting his health and safety, by providing nutritious food, by setting aside time for elimination, by allowing space to move and to practice bodily control, and by giving time for rest and relaxation.

- Intellectual development by providing equipment and materials which are interesting and stimulating; by allowing each child to express his interests through materials, language, and music; by furnishing new experiences closely related to the child's day-to-day living; and by providing experiences geared to the ability and readiness of each child.

- Social development and learning by recognizing the child's need to get along with other children and adults, by providing materials which enable children to enjoy playing together, and by helping the child to develop techniques which will make him an acceptable member of the group.

- Emotional growth and development by making him feel needed and wanted, by helping him to become independent, by accepting him and his feelings, and by guiding him toward releasing his feelings in acceptable ways.

Several types of child care centers are in operation throughout the country. The following provide the majority of opportunities for employment of persons trained in child care services:

- Day care centers sponsored by non-profit corporations, church groups, foundations, or civic organizations with fees based on the family's ability to pay

- Child care centers supported by funds provided by the state with the fees graduated according to the family's income

- Private nursery schools and kindergartens supported entirely by fees from families who are able to pay for the service

- Head Start Programs supported by federal funds and generally under the management of a local board. This program can be either a half day or full day one which provides cultural enrichment and therapeutic medical care for the disadvantaged child.

- Federally operated day care centers supported by federal funds which are provided through state child welfare programs

QUESTIONS:

1. Give at least six reasons for parents sending their children to child care centers.

2. In the following statements, parents express certain needs which they hope the child care center will fulfill. Name the appropriate area of development indicated in each situation.

   a. "Sue doesn't have anybody to play with in the neighborhood. There aren't any children her age."

   b. "Lucy demands my attention. She wants me to watch her instead of doing by housework. She needs someone to play with."

   c. "Barbara cries when the other children go to school. She seems to be lonely without them."

   d. "Our apartment is so small there isn't room for Thelma to play. She needs room to stretch and grow."

   e. "I do not have time to read to Ruthie, and she loves for someone to read or tell stories to her."

   f. "May is three years old. She is too dependent on me and needs to be around other adults who will help her feel that they accept her, too."

3. Briefly, restate the needs of children which must be met by the child care center program.

4. A number of professional groups and organizations interested in the care and training of young children are discussed on pages 108-112 in Leeper, et al., Good Schools for Young Children.
   a. Outline the major purposes of the Association for Childhood Education International and the National Association for Education of Young Children.
   b. Indicate persons who are eligible for membership in these organizations.
   c. Discuss with your teacher and the director at the training station the possibility of your participating in any local or state organizational meetings which you might be eligible to attend.

5. What was the increase in number of nursery schools reported to the U.S. Office of Education during the period from 1920-1932?

6. What two national emergencies since 1930 have expanded the demand for schools for young children?

7. What program was begun in 1964 for culturally deprived children? Briefly describe the program.

8. Which of the following statements are examples of the objectives of modern nursery schools?

   a. My main goal is to get the children ready for first grade.
   b. My main concern is to help each child develop in his own way.
   c. I expect all the children to be able to count to ten and say the alphabet at the end of the year.
   d. I try to provide a wide variety of experiences for the children so they can each find activities which interest them.

9. What are the four types of child care centers where most employment opportunities for child care aides may be found?

ASSIGNMENT:

After reading pages 91-94 in Leeper, Good Schools for Young Children, investigate your community to determine the types of child care services available. Write a brief report on at least five schools or centers including the following information: (1) name of school or center, (2) address, (3) name of director, (4) classification of school or center according to those given in the reference, (5) number of children, and (6) purpose of the school or center.

UNIT I-2

WHAT IS A CHILD CARE AIDE?

SUBJECT: Well, All Right!

TASK: Becomes oriented to child care center

OBJECTIVE: Be able to analyze the child care center for certain characteristics which meet minimum standards

CHARACTERISTICS OF AN APPROVED CHILD CARE CENTER

As you become oriented to the child care center training station, you will begin to recognize characteristics which are desirable and/or essential in meeting minimum standards and carrying out the purposes of the center. You will be unable to perform effectively as a child care aide until you accept responsibility for helping the center to meet these standards.

Most states have a state licensing law and unless the center meets the requirements of the law, it cannot be approved and licensed as a child care center. The state agency which handles the licensing will vary from one state to another. Some of the conditions which must be met by child care centers are listed as part of the assignement in this subject area.

NOTE: The minimum standards for day care center in Texas are listed in free bulletins published by the Texas State Department of Public Welfare. These are:
(1) *Minimum Standards for Day Care Centers.* Austin, Texas: Texas State Department of Public Welfare, John H. Reagan Building, September 15, 1950. (In process of revision)
(2) *Minimum Rules and Regulations for Operation of a Commercial Day Care Center.* Austin, Texas: Texas State Department of Public Welfare, John H. Reagan Building, October 1, 1961.

ASSIGNMENT:

Without being critical of your employer's facilities, select questions from each of the three divisions below. Briefly analyze your training station in relation to the characteristics you select.

BUILDING (Select at least four questions.)

Is the building constructed so there are few accident hazards?

Does the size of the room permit vigorous activity (at least 35 square feet per child)?

Is there sufficient ventilation in the rooms?

Are the playrooms colorful and cheerful?

Do low windows and gates have locks?

Do the bathroom facilities meet the group needs?

Are all facilities clean and sanitary?

What space is provided for the child in case of illness?

How do the rooms lend themselves to supervision of play at all times?

Are the fire exits in the building adequate?

PLAYGROUND (Select at least four questions.)

Does the size of the playground permit vigorous play (80-100 square feet per child)?

Have all rocks, ditches, and other accident hazards been removed from the playground?

Is the play area fenced for security?

Is the equipment in good repair?

Is the arrangement of equipment conducive to safe play?

Is there sufficient shade and shelter?

STAFF (Select at least three questions.)

Do the workers have warm, friendly personalities?

Are the workers in the center trained in early childhood education?

Are interviews between teachers and parents encouraged?

Do parents have permission to visit the center?

Are regular physical examinations given to workers?

Is there a state and/or local licensing requirement?

Is the center licensed and approved?

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UNIT I-3

WHAT IS A CHILD CARE CENTER?

SUBJECT:	Sixteen Tons
TASKS:	Observes policies of center concerning work schedules, absences, and health regulations Learns what is required of a child care aide
OBJECTIVES:	Be able to (1) select duties performed as a child care aide (2) identify desirable characterisitcs of a child care aide (3) evaluate self in terms of personal qualities necessary for success as a child care aide

RESPONSIBILITIES OF CHILD CARE AIDES

The duties of a child care aide vary from one child care center to another and from day to day, depending on the schedule of activities for the day. It is necessary that the child care aide be flexible and willing to do whatever needs to be done. It is also important that she learn to go ahead and carry out the duties assigned to her without always waiting to be told what to do. Responsibilities which may be assigned to a child care aide are listed below. The aide:

Helps children accept the center and participate in its activities

Helps children learn the established routines of the center

Helps to develop in the children a sense of "belonging" in the center

Helps children become more independent in removing own garments, such as coats and sweaters

Assists children in developing good housekeeping habits, such as putting toys away

Guides children in helping to keep the center clean and attractive

Assumes some responsibility for helping children prepare for snacks and mealtime

Helps children to develop good eating habits and table manners

Helps children to develop positive, acceptable attitudes toward food and eating

Prepares and serves mid-morning and mid-afternoon snacks

Sets the table for noon meal

Assists in arranging mats on the floor for children's rest period

Supervises rest period of children

Stacks or stores mats after children's rest period

Assumes some responsibility, under supervision, for play and learning experiences of children

May relieve teacher for short periods, when needed, by reading stories to children, conducting finger plays, and leading songs

Helps children with nature and science experiences

Helps prepare and assemble play materials needed by teacher and/or director

Arranges physical environment, under supervision of director, so it is appropriate for play and learning experiences of children

Places clean towels and wash cloths on rack for children each day

Assists children with routines, such as toileting, washing, and hanging towels after use

Helps to maintain health and safety of the children at the center during rest and play periods

Helps children establish sanitary habits of toileting and personal hygiene appropriate to their age level

Practices safety procedures by being alert to situations involving hazards to the safety of children, such as sorting toys that may be unsafe

Observes accepted procedures for reporting accidents and signs of illness or discomfort in children

Assists in administering first aid at the center for children's minor accidents, cuts, and bruises

Works cooperatively with center staff and accepts instructions and guidance from director

Participates in staff planning and evaluation sessions concerning center policies and program

Helps to evaluate own progress in meeting responsibilities to the center

Observes policies of center concerning work schedules, absences, and health regulations

Follows regularly assigned schedule of responsibilities and assumes other responsibilities as needed

Assumes some responsibility for maintaining cleanliness and attractiveness of the center during the day

PERSONAL CHARACTERISTICS OF THE CHILD CARE AIDE

REFERENCE: Leeper, Sarah, et al. Good Schools for Young Children. New York: The Macmillan Company, 1968. pp. 103-106.

Trained teachers are generally regarded as the most significant factor in determining the quality of experience that a child will have in the child care center. Educational certification is one means whereby "good" child care teachers and workers are assured. Requirements for certification, however, do not always insure that the person will be successful in working with children. An individual, who is interested in working with children but does not meet all of the essential requirements for a teacher, may be trained to assist in other ways in the child care center program.

Because of the present shortage of trained personnel, nursery schools sometimes employ former nurses, dietitians, or secretaries to help fill vacancies. Many teachers and parents are anxious to organize nursery schools or play groups as a part of the educational program for their church or club. These individuals often lack the specific knowledge necessary to provide a good nursery school environment. Because of the increase in number of child care centers and the lack of trained personnel, there are many opportunities for employment for trained child care workers.

The Home Economics Cooperative Education Program is designed for the student who is interested in acquiring the basic personal qualities needed by a child care iade. The person who works with children must understand the importance of developing certain personal characteristics which will make her more effective in her work. The child care aide will find the following guidelines helpful as she works in the center:

MAINTAIN A SENSE OF HUMOR

The ability to find humor especially in situations where you are involved helps to turn "mountains into molehills." For example:

The Slumberland Child Care Center was preparing for parents' day. All the children were excited about the activities which were planned. Five-year-old Roy asked Wilma, the child care aide, "May I bring my puppy to the party?" Wilma, busy with the routines of the center and confident that the child would not remember, replied, "Yes, by all means!" To the surprise of everyone, Roy's mother called to ask if Roy was supposed to bring his German shepherd to the party.

CULTIVATE A SENSE OF DEDICATION AND DIRECTION

Goals are more easily reached when you know where you are going and why.

DEVELOP A GENUINE INTEREST IN PEOPLE

You work with people not things.

TAKE TIME TO RELAX

When your frustration threshold is reached, recognize that it is time to take a break.

AVOID MISERY AND ITS FELLOW TRAVELERS

Enthusiasm is catching...and so is despair.

KEEP SMILING...WE ARE ALL EXPENDABLE

Each of us has responsibilities, and we must be flexible enough to adjust.

BELIEVE IN YOURSELF

A sense of self-worth leads others to have confidence in you.

FIND AN "OUT" FOR TENSIONS

Everyone needs a constructive outlet for "blowing off" steam.

AIM FOR SUCCESS

You are now beginning your journey into the world of work. Good Luck!

Each child care center will have its own policies concerning work schedules, absences, and health regulations. Employees' work schedules are determined by the duties which need to be performed at different times throughout the day. If an employee is going to be absent, it is important that the director be notified immediately so adjustments can be made in the other employees' schedules. Most centers will set up their own rules about absences, but child care workers should never report to work when they have a contagious illness. Additional information about health regulations is given in the unit on "Health and Safety."

QUESTIONS:

Select the number of the best solution for the situations described in items 1 and 2.

1. One of your co-workers became ill and had to leave the center. You, as an aide, assumed some of her responsibilities. As a result you should
   a. complain about the extra amount of work.
   b. accept the additional responsibility and ask for instructions.
   c. expect extra pay for extra work done.

2. The child care aide was busy with her school assignments and her responsibilities at the center. One morning as she turned off the alarm clock, she made a decision about going to work. What would your decision be?
   a. Go back to sleep and get the badly needed rest.
   b. Call the employer and tell her you are unable to be there because of illness.
   c. Report to work because it is the right thing to do.
   d. Ask your teacher to call the employer.

ASSIGNMENT:

I. Using the list of responsibilities which may be assigned to a child care aide, list those which you are now performing in your training station. What information do you feel you need to be able to perform these tasks?

II. Thinking of the qualities you feel you possess that will help you in your work as a child care aide, write a page telling why you selected child care as a vocation.

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UNIT II-1

THE CHILD CARE AIDE: A MEMBER OF THE TEAM

SUBJECT: Hey, Coach!

TASK: Works cooperatively with staff and accepts instructions and guidance from the director

OBJECTIVES: Be able to (1) identify ways of working cooperatively with others
(2) discuss necessity for teamwork among staff members
(3) describe influence of behavior of adults on behavior of children
(4) recognize ethical principles in working under supervision and following directions

COOPERATION OF THE CHILD CARE AIDE AND OTHER STAFF MEMBERS

The child care aide shares the responsibility of the child with many other people in the center. She does not work as an individual but as a member of a staff where each has a role to play in the child's development. It is important, therefore, that she know what her duties are and how they may be distinguished from the duties of other employees. It is also necessary that she understand what her role is to be with the children. Her awareness of being a part of the team will help her to feel comfortable about asking for advice and help with problems on the job. The director, supervisor, teacher, nurse, doctor, and/or other personnel will help the child care aide as she assumes her role in the center.

Teamwork is necessary for the education and development of the child. Each child is influenced by the persons with whom he comes in contact. The care of the child is shared by the mother, father, doctors, nurses, clergymen, relatives, teachers, and others who play a role in helping to nurture the child in his early years. Nursery school, kindergarten, and public school teachers; principals; summer camp directors; counselors; and the child's peers continue to participate in the child's development and training. The child's training is more successful when the parents and the various team members realize the contributions being made by the others toward the child's development.

The team responsible for the child's training in the child care center should be selected and organized carefully. The child care aide is a member of this team. Everyone on the team is an educator; everyone's capacities have to be used to the fullest extent to bring about the satisfactory development of the child.

For the child care aide who is new at the center, the job of knowing each staff member may be more complicated than the job of knowing the children. In the larger centers the number of personnel, the status and function of each employee, and the interaction of the children and adults may seem overwhelming. The child care aide may ask herself, "Where do I fit in? How can I play a part?" One of her first tasks, therefore, is to understand the organization in the center and the role she is expected to assume as a member of the team.

Good organization and a cooperative attitude on the part of all employees are necessary in order to achieve teamwork. There must be respect for other workers. The child care aide needs to realize that not only her own job, but everyone's job, is important. It may take time to understand the details of other staff members' responsibilities; however, it should be recognized that they are essential to the total function of the center. Interest in the work of the other personnel makes teamwork easier.

The attitudes of a child care aide influence both the children and other employees. Children copy adults and react to others as they see adults act. If the child care aide respects the other employees the children will learn to respect others. A cheerful, enthusiastic approach to tasks assigned will probably cause a similar response in other staff members as well as in the children.

The functions of the child care aide may be many. She may be given specific jobs, such as supervising the children's play activities or rest periods. As each job is learned, she may progress to a job which entails more responsibilities. When several child care aides are employed by the center, each must be aware that her work and her assignments have been as clearly, fairly, and wisely distributed as possible. Directors usually try to make assignments that will give aides opportunities to use their particular skills.

It is important that the child care aide maintain rapport with the other employees and with the children. She should not attempt to relax the rules or try to establish greater discipline during her hours of duty. Policies have been formulated for a purpose. The security of the children lies in the continuation of the climate which has been established in the center. Children become confused when the behavior expected of them varies from one person to another.

Another factor which affects the cooperation among staff members is the fact that adults seek excuses to maintain familiar ways and ideas and are often reluctant to change their ways of doing things. Knowing about this tendency helps one to understand why new ideas may be rejected when first presented. It also helps one to realize his own unwillingness to do things someone else's way. The child care aide, therefore, needs to be sensitive both to her resistance to change and to the resistance to change of those about her.

How Are Adults Like Children?

Adults have many of the same kinds of feelings as children. They, at times, experience the same feelings of hostility and rivalry. A child care aide may have greater appeal to one child than to another. She may have certain skills that endear her to some people, but not to others. This may result in hostility and friction in her relationships with the children and/or with other employees. Friction cannot be denied; it must be recognized and dealt with. A child care aide who learns to face these conflicts in an adult manner will then be able to understand and help children who express feelings of hostility and rivalry.

Another factor which influences one's behavior is the inevitable frustration of the "growing-up" process. Everyone experiences feelings of frustration and resentment which can be handled more easily if they are recognized. Remember that the child at the center is also facing some of these same frustrations, and his development may be influenced by the attitudes of the adults working with him.

The adults in one's life either have helped one to deal with these frustrations or have added to them, many times unknowingly. If the adults were gentle and confident in what they were doing, little resentment was aroused. If they were struggling with their own hostilities, however, they may have had negative feelings which resulted in wanting to "lash out" and hurt in return. Few people have been handled continuously with gentleness, so negative feelings frequently "show themselves." Negative feelings may be expressed by children as a result of their reactions to someone who interferes with their activities.

Everyone needs an outlet for negative feelings. Hiding or trying to suppress these feelings may be damaging. A child often hits or bites to express negativism. Adults, on the other hand, find outlets through art or music or "spilling it to a friend" in an effort to keep these feelings manageable. Adults have a capacity for managing their feelings and gradually become more diplomatic than children in expressing or releasing their feelings.

The child and the adult differ in that the adult can be objective--he can study and analyze his own behavior. For this reason, the adult can change his actions to make them more acceptable if he so desires. As he observes and participates in different experiences with the children and with other adults in the child care center, he gains insight into what his responses are and why he responds in a certain manner.

Understanding oneself helps one understand others. Everyone is alike in many respects. Feelings about self and others will have an effect upon the relationship one has with the other personnel and with the children at the center. Individuals who have grown up in a loving, sharing, helping atmosphere are more likely to be loving and willing to share as adults than those who have grown up in a non-sharing, non-loving atmosphere. Thus, it is important for the child care aide to try to understand and accept her own feelings as well as those of other staff members if the working situation is to be a constructive one.

The poem by Dorothy Law Nolte which follows, helps to express the importance of the atmosphere in which a child lives.

CHILDREN LEARN WHAT THEY LIVE

If a child lives with criticism, He learns to condemn.
If a child lives with hostility, He learns to fight.
If a child lives with ridicule, He learns to be shy.
If a child lives with shame, He learns to feel guilty.
If a child lives with tolerance, He learns to be patient.
If a child lives with encouragement, He learns confidence.
If a child lives with praise, He learns to appreciate.
If a child lives with fairness, He learns justice.
If a child lives with security, He learns to have faith.
If a child lives with approval, He learns to like himself.
If a child lives with acceptance and friendship,
He learns to find love in the world.

Ethical Principles

Professional ethics are very important in a program involving young children and their parents.

The following suggestions should be closely followed:

1. If you have a just complaint about another teacher or employee, take it to the person in charge of the center. Do not gossip about the situation or about the person to other staff members.

2. Do not discuss a child's behavior with anyone except the teacher to whom you are responsible. Be especially careful about discussing anything about him in the neighborhood.

3. Do not criticize a child's parents even though you think that you have ample proof that the child is being neglected.

QUESTIONS:

1. As a member of the child care team, how can you contribute to the center program?

2. How would the teamwork among members of the center influence the children?

3. Make a list of suggestions that you think are important in making you feel that you are a part of the team. Be prepared to discuss these with your teacher.

4. What effect will your attitude have on the people with whom you work at the center?

5. Explain briefly your interpretation of the statement: "Understanding others helps you to understand yourself."

6. True or False. People who grow up in a loving, sharing, helping atmosphere will be loving and willing to share.

7. True or False. Child care workers will have very little influence on the behavior of a child.

8. True or False. It may be damaging to attempt to hide feelings of hostility and resentment.

9. True or False. Most adults like to make changes in themselves.

10. True or False. A child may hit or bite as an outlet for negative feelings.

Select the more appropriate answer(s) for numbers 11 through 14:

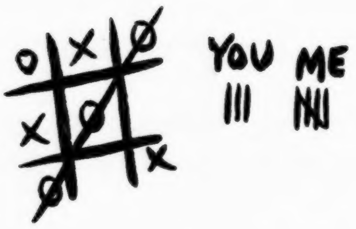
11. Wilma, a three year old, was disciplined severely by a teacher in the child care center. As a member of the team, you
    a. corrected the teacher.
    b. commented to other workers.
    c. took sides with the child.
    d. silently disagreed with the action of the teacher, but carried on your own work.

12. Dorothy is a nurse at the center. She has personal traits which you dislike. As a member of the team, you
    a. make sarcastic remarks to her.
    b. comment to other workers about her traits.
    c. ignore her.
    d. learn to face your conflicts and work with her.

13. The adult's need to express negative feelings is met best by
    a. screaming.
    b. "spilling it to a friend."
    c. hitting the door.
    d. participating in art or music activities.

14. If a child does not readily accept you, it is probably because he
    a. needs more time to know you.
    b. has personal feelings against you.
    c. does not like the color of your hair.
    d. may have had unpleasant experiences with adults.

15. Review the suggestions which are given for ethical principles in working with others. Restate these principles in your own words.



UNIT II-2

THE CHILD CARE AIDE: A MEMBER OF THE TEAM

SUBJECT: Scoreboard

TASKS: Participates in staff planning and evaluating sessions concerned with center programs and policies

Helps to evaluate own progress in meeting responsibilities in the center

OBJECTIVES: Be able to (1) describe function of staff planning sessions
(2) evaluate own performance as a child care aide

REFERENCE: Green, Marjorie M. and Elizabeth L. Woods. A Nursery School Handbook for Teachers and Parents. Sierra Madre, California: Sierra Madre Community Nursery School Association, 1966. pp. 89-91.

STAFF PLANNING SESSIONS

Staff planning sessions are important to the overall functioning of the child care center. These sessions give the director and other personnel an opportunity to share experiences and problems. Each member of the staff may be asked to help evaluate the effectiveness of the center program and to discuss ideas for improving the servies offered to the parents of young children.

The policies and procedures which are concerned with personnel work schedules, absences, and health regulations may be discussed in periodic general meetings with all employees. At times, however, the child care aide may be asked to perform certain duties in order to relieve the teacher for center administrative staff meetings.

Some of the following questions should be helpful in evaluating center policies and procedures during staff planning sessions. As you read the questions, list things you might do to improve the overall functioning of the center in which you are working. You may want to discuss your ideas with the center director and your teacher.

What evidences of cooperation between teachers and children do you see?

Do the members of the team work together to provide the services for the children?

Do the children appear happy and natural?

Do the children always wait for directions from the teacher, or are they able to play without constant adult attention?

What evidences do you find that individual children are being given special helps that they need?

Are the children being stimulated to enlarge their interests and abilities?

QUESTIONS:

1. How will periodic planning sessions help the staff of the child care center?
2. How often should staff meetings be held?
3. What are at least six topics that may be discussed at the staff planning meeting?
4. Are there topics that should not be discussed at staff meetings? If so, list them.
5. With which of the following statements about staff meetings would Green and Woods agree?
    a. Teachers should not voice opinions which differ from those of the director.
    b. Individual children should not be discussed; this should be done in private with the director.
    c. Final decisions are usually made by the person in charge and should be supported by the staff.
    d. Complaints should be brought out into the open during staff meetings.

WHAT KIND OF A CHILD CARE AIDE AM I?

In order to gain the maximum benefit from staff evaluation sessions, each employee should be able to evaluate her own personal qualities, job requirements, and performance on the job. The child care aide should be particularly thorough in evaluating herself and in trying to cooperate with other staff members. The check list "What Kind of a Child Care Aide Am I?" should be helpful in self-evaluation.

Directions: You can take stock of yourself right now and find out how you rate as a child care aide. Answer the questions honestly so that you will have an accurate picture of your performance at the center.

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	YES	NO
1. Am I neat in my personal appearance and work?		
2. Am I punctual?		
3. Do I apply myself to the job without being easily bored or distracted?		
4. Do I adapt to new and unexpected situations easily?		
5. Can I work under pressure, when necessary, without becoming nervous and upset?		
6. Do I have confidence in my abilities?		
7. Am I emotionally stable, capable of taking things in stride?		
8. Do I have enough initiative to be able to work on my own without waiting to be told what to do?		
9. Are my job plans in keeping with my own capacities and the opportunities employers have to offer?		
10. Do I have a sense of duty and responsibility?		
11. Am I reliable? Could I be depended upon to do a job satisfactorily?		
12. Do I have the friendship and respect of fellow workers?		
13. Do I cooperate with fellow workers?		
14. Do I cooperate with supervisory personnel and management?		
15. Do I follow directions willingly and without argument because I respect authority?		
16. Do I accurately carry out instructions?		
17. Can I accept criticism without feeling hurt?		

	YES	NO
18. Do I ask questions about things I do not understand?	______	______
19. Do I complete a job once I start it?	______	______
20. Am I a pleasant person to work with?	______	______
21. Do I like people?	______	______
22. Am I friendly and congenial?	______	______
23. Do I enjoy activities with children?	______	______
24. Do I read materials concerning the training of small children?	______	______

BOOSTING THE SCORE:

How did you rate? If you answered yes to most of the questions, you can become a good employee. All you need now are the necessary skills and training.

If, on the other hand, you answered no to a number of the questions, you have some work to do to strengthen your weak spots, that is, those things about you that need improvement. You can improve your chances for success in your "job training" right now.

ASSIGNMENT:

Make a list of your weak points. Outline ways to improve yourself in these areas. Discuss your plan with your teacher.

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UNIT II-3
THE CHILD CARE AIDE: A MEMBER OF THE TEAM

SUBJECT: Who, Me?

TASK: Follows regularly assigned schedule of responsibilities and assumes other responsibilities as needed

OBJECTIVES: Be able to
(1) identify factors to consider when outlining the daily schedule of activities of a child care center
(2) recognize the types of opportunities for learning which should be included in the schedule
(3) analyze schedule at place of employment in terms of opportunities provided

REFERENCES: Green, Marjorie M. and Elizabeth L. Woods. A Nursery School Handbook for Teachers and Parents. Sierra Madre, California: Sierra Madre Community Nursery School Association, 1966. p. 34.

Heffernan, H. and Vivian Todd. The Years Before School. New York: The Macmillan Company, 1965. pp. 161-175; 607.

DAILY ACTIVITIES AT THE CENTER

A child care aide must become proficient in performing her tasks. To do this she needs to follow the master schedule of the center and assume responsibility for tasks regularly assigned to her. The schedule will vary from center to center, but examples of three types which may be followed are shown on pages 168 and 607 of Heffernan and Todd's The Years Before School.

The daily schedule of activities should provide opportunities for the young child:

To learn about himself and others through
- * Being understood and accepted by the teacher and the child care aide even when he has mixed feelings of pride, anger, grief, pleasure, and fear as he copes with a new experience
- * Being helped to talk about his feelings and those of other children who behave similarly or differently
- * Listening to stories about other people

To develop social relationships through
- * Participating in experiences, discussions, and stories
- * Having opportunities to be possessive, stand up for himself, and discuss difficulties in group situations

To learn about the outer world through
- * Having simple experiences with natural phenomena
- * Having a chance to see and take care of growing things
- * Taking excursions within the community
- * Being free to explore his environment

To learn to deal with reality through
- * Having real tasks, such as helping to clean
- * Making things that are usable
- * Fixing and repairing items appropriate for his size

To have creative and aesthetic experiences through
- * Listening to, responding to, and enjoying good music, storytelling, and poetry reading
- * Receiving encouragement to make up stories and poems if he feels like it
- * Participating in dramatic play
- * Observing attractive pictures which are displayed on the center wall at his eye level
- * Having freedom to use various media, such as paint, clay, wood, and cloth

To develop skills in both large and small muscle activities by
- * Riding wheel toys and climbing other pieces of play equipment
- * Participating in rhythmic activities
- * Building with wood blocks, putting puzzles together, and stringing beads

To take responsibility for his bodily needs by
- * Being helped to decide for himself when to go to the toilet and how much to eat at mealtime
- * Being expected to wash his hands before eating and after toileting, to wipe himself properly and flush the toilet, and to wipe his nose when it is running

Some guides to follow when planning schedules for preschool children are:[1]

1. Maintain a routine. Children depend on routines and need to know the sequence of the day's activities. Knowing where they belong at all times helps to give them a feeling of security.

2. Keep the time schedule flexible so interesting projects can be completed or long stories read. The same sequence of activities should be followed, but length of time may vary according to interest of the children.

---

[1] Adapted from material prepared by Mabel Pitts, Austin, Texas.

3. Plan for sufficient time for routines. Warn children a few minutes ahead of time before lunch, rest, or bathroom activities. Children often become tense and irritable when rushed.

4. Plan for a balance of activities, such as indoor and outdoor play; quiet and active play; and large group, small group, and individual activities.

5. Provide new experiences within the routine schedule. Children need routine, but they also need a wide variety of experiences.

QUESTIONS:

1. What seven types of opportunities for learning and developing should the activities at the center provide for the children?

2. According to Todd and Heffernan, what is the major task for preschool children in a child care center?

3. With which of the following statements about free choice and large group activities would you agree?
   a. Free-choice activities should usually be those which are familiar to the children and not dangerous.
   b. Children should be expected to stay with a particular free-choice activity for at least 15-20 minutes.
   c. All children in a center should take part in the large group activities even if they do not want to do so, since this is an important part of their learning.
   d. If field trips are to be successful, the children need to learn to stay together as a group.

4. What is a major advantage of a small-group activity?

5. Schedules for preschool groups should provide for a rhythm of ________ and ______________.

6. When working with a group of children, what are at least four signs of fatigue that would indicate the children needed a change of activity?

ASSIGNMENTS:

I. How does the master schedule in the center where you are working provide for the opportunities required in answer to question 1?

II. Using Heffernan and Todd's *The Years Before School*, page 607, Table 17-1, as a guide, set up your own chart and outline the daily schedule of activities at the center in which you are employed. Show the time schedule, the activities of children, and your assigned tasks according to the sample below.

	SCHEDULE OF (name of center)	
TIME	CHILDREN'S ACTIVITIES	(your name)
8:30		Place clean towels and wash cloths on rack for children
8:45	Children arrive	-----------------

UNIT III-1

THE CHILD AND HIS FAMILY

SUBJECT: Here I Am!

OBJECTIVES: Be able to (1) list basic needs of young children
(2) outline the family life cycle
(3) discuss the influence of the family on the children
(4) analyze the influence of the home atmosphere on the behavior of the family members

REFERENCE: Supplementary: Hurlock, Elizabeth B. Child Growth and Development. New York: McGraw-Hill Co., 1968. pp. 275-291.

FAMILY LIFE CYCLE

The child grows, develops, and matures by undergoing many successive changes, and readjustments from conception to senescence (aging). In the same manner, the family passes through a number of different stages. Although the stages of the family life cycle may be named separately for discussion purposes, they cannot be isolated in actual family living. The family life cycle may include the following stages:

Beginning

Childbearing (oldest child under 2-1/2 years)

Preschool children (oldest child between 2-1/2 and 6 years)

School children (oldest child between 6 and 13 years)

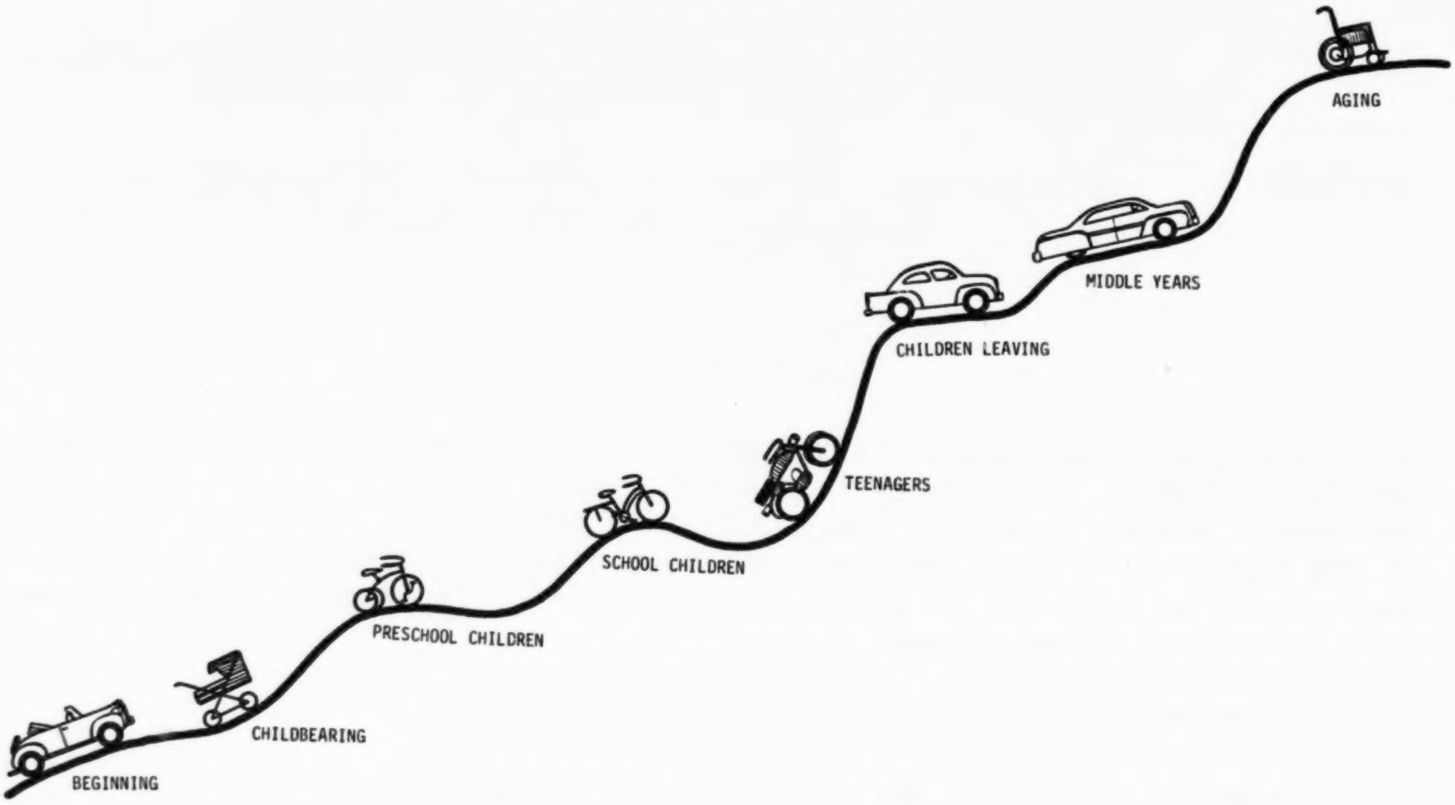
Teenagers (oldest child between 13 and 20 years)

Children leaving home (oldest child over 20 years)

Middle years with no children at home

Aging

The individual man and woman begin family life together at marriage. The second stage of the family life cycle begins with the conception of a child. After the birth of the baby, the husband and wife assume the additional roles of father and mother. The new baby must be considered a member of the family from the very beginning. The impression he has of his family and their total reaction to him will affect his emotional growth and development. As successive children are born, the parents must enlarge their roles to include the additional responsibility of helping their children develop as individuals and as members of the growing family group. Each new member of the family group causes a significant reorganization of family life and changes patterns of living and interpersonal relationships. The family, therefore, is never static but always changing.



FAMILY ENVIRONMENT

Each family may be seen as a group of interacting personalities with each family member trying to meet his own basic needs within the pattern of family life. Each family member has a unique hereditary pattern and reacts differently to his environment. Each is influenced also by the way others react to him and express their feelings toward him.

Contrary to popular belief there is no ideal position within a family. In fact, there is no position in the family which does not involve certain special problems of adjustment.

Most children regard their roles as inferior to those of their siblings and wish they had been born sooner or later in the family so that their roles would be different. While they can see all the advantages associated with other ordinal positions, they usually fail to see the disadvantages. Information on each position in the family is given below:

> Oldest: The first-born is often overprotected and the victim of the comparative inexperience of his parents. He is likely to be expected to assume responsibilities for the care of younger children. An attitude of self-importance is fostered by the parents. As a result the older child may lord it over his younger siblings. He is more dependent and more excitable, has his feelings hurt more easily, and is less demonstratively affectionate than later born siblings.
>
> Middle: The second-born child is spared much of the parental anxiety, emotional tension, and overprotectiveness experienced by the first-born. He is less dependent than the first child and often uses him as a peacemaker. The middle child in the family is apt to be somewhat neglected.
>
> Youngest: The youngest child of the family is likely to be pampered and spoiled. Because his self-confidence has never been jolted by competition with a newly arrived sibling, he may have an advantage over his other siblings. This may result in an optimistic outlook on life. He resents being "bossed" by older siblings. He often becomes defiant and irritable because of criticism and buckpassing.

Other factors within the family environment that influence the child's development are:

Poor health of a family member
Presence of a grandparent or older person in the home
Constant quarrels and tensions on the part of family members
Conflicting personalities of family members
Inconsistency of guidance
Extreme maturity of one or both parents
Physical environment of the home, such as small apartment, house
Parents who are constantly away from home--working mother, father in the service

The family also interacts with the larger society of which it is a part. Because the home is the child's first environment, it sets the pattern for his attitudes toward people, things, and life in general in the larger society. Even though the pattern established in the home will change and become modified as the child grows older, it will not be completely destroyed.

As you, the child care aide, understand the significance of the family life cycle and its influence on the child who is enrolled in the child care center, you will be better able to assist the child in assuming his role within the cycle. In order for the child to be well adjusted and to perform in an acceptable manner, the home and the child care center should provide an environment which will help him emerge at his fullest potential. The environment should insure that the child's basic needs are met and that he is able to develop a healthy self-concept or sense of self-worth.

BASIC NEEDS

All human beings have needs which are called basic or psychological. Different people call these needs by different names, but the general ideas are the same. The psychological needs are (1) to love and be loved, (2) to feel secure or to belong, (3) to feel adequate, (4) to achieve, (5) to gain independence, and (6) to believe in something. A family can help its members to meet these needs. For example, the first expressions of love a child usually experiences come from his parents. As they show their love for him, he gradually learns to love in return.

In a family situation where there is a good relationship among family members, the child's needs are usually met and he has a sound basis for the development of a healthy personality. On the other hand, if there is discord among family members, the child may feel insecure or unloved. When a child's needs are not met, his chances for a satisfactory adjustment to others and society in general are reduced. As a child, he may react in various ways, such as nervous mannerisms, thumb sucking, eating problems, and bed wetting. On the other hand, if the parents provide a more stable environment in the home, the child is likely to become more self-assured and better adjusted socially with fewer conflicts and less tensions.

The child will be affected if the parents have a tendency to be overanxious and overcautious, if they worry about insignificant things, if they are inconsistent in discipline, and if there is little laughter in the home. Such an environment produces a child who is unpredictable as far as typical behavior and who may have outbursts of temper. He may also have more serious problems, such as speech disorders. If the parents are calm, consistent in their discipline, and enjoy one another, the child is likely to have fewer problems as he grows and matures.

Additional information on basic needs is given in Unit IV-3.

QUESTIONS:

1. a. List the eight stages of the family life through which families may pass.
   b. Describe the family life cycle which most nearly applies to your own family.

2. The environment in the child's early life is an important factor in normal development. If the parents tend to be overanxious and worry about insignificant things, the child has a tendency to be
   a. sure of himself.
   b. unpredictable.
   c. egotistical.
   d. socially adjusted.

3. Name the six basic needs of children.

ASSIGNMENT:

I. Write a paper comparing the home atmosphere of each family in case studies A and B. Some questions you might answer are: Can a child grow up with a happy, well adjusted personality in the atmosphere described in each home? How has the atmosphere already influenced the older child in each family? Which of the basic needs are being met and which are being ignored? Predict the type of behavior each family member will have during the rest of the day.

Case Studies

A. In the Johnson's home, the father is rushing to leave for work when ten-month-old Karen awakens. She is ignored for some time before the the mother gives her a bottle. Four-year-old Susan tries to gain her mother's attention to help her with her shoe laces. Although the father does not have time to help with the children, he demands to know why the breakfast is not ready. The mother remarks, "You should get up earlier to help me with the children if you want me to cook your breakfast."

B. In the Smith's home, ten-month-old Betty awakens to the sound of soft music coming from the radio in the kitchen. Her mother is preparing the family breakfast. Four-year-old Mary hears Betty cooing and goes to her bed to talk to her. The father stops by the bed to talk to Betty, then helps Mary get dressed to go to nursery school. The mother takes Betty to her high chair in the kitchen while the family eats their breakfast. The atmosphere is calm, but busy and congenial.

II. Select as least two of the environmental factors listed on pages A-34 and A-35 which influence the child's development. Discuss ways in which you think these factors might affect the child in the family.

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UNIT III-2

THE CHILD AND HIS FAMILY

SUBJECT: Where Am I Going?

OBJECTIVES: Be able to
1. (1) interpret principles of development
2. (2) analyze effects of environment on growth and development of child
3. (3) recognize characteristics of children from ages two to five
4. (4) discuss the five areas of development

REFERENCES: Supplementary: Brisbane, Holly. The Developing Child. Peoria, Illinois: Chas. A. Bennet Company, 1965. pp. 257-336.

Baker, Katherine Read and Xenia F. Fane. Understanding and Guiding Young Children. Englewood Cliffs, New Jersey: Prentice-Hall, Inc., 1967. pp. 107-129.

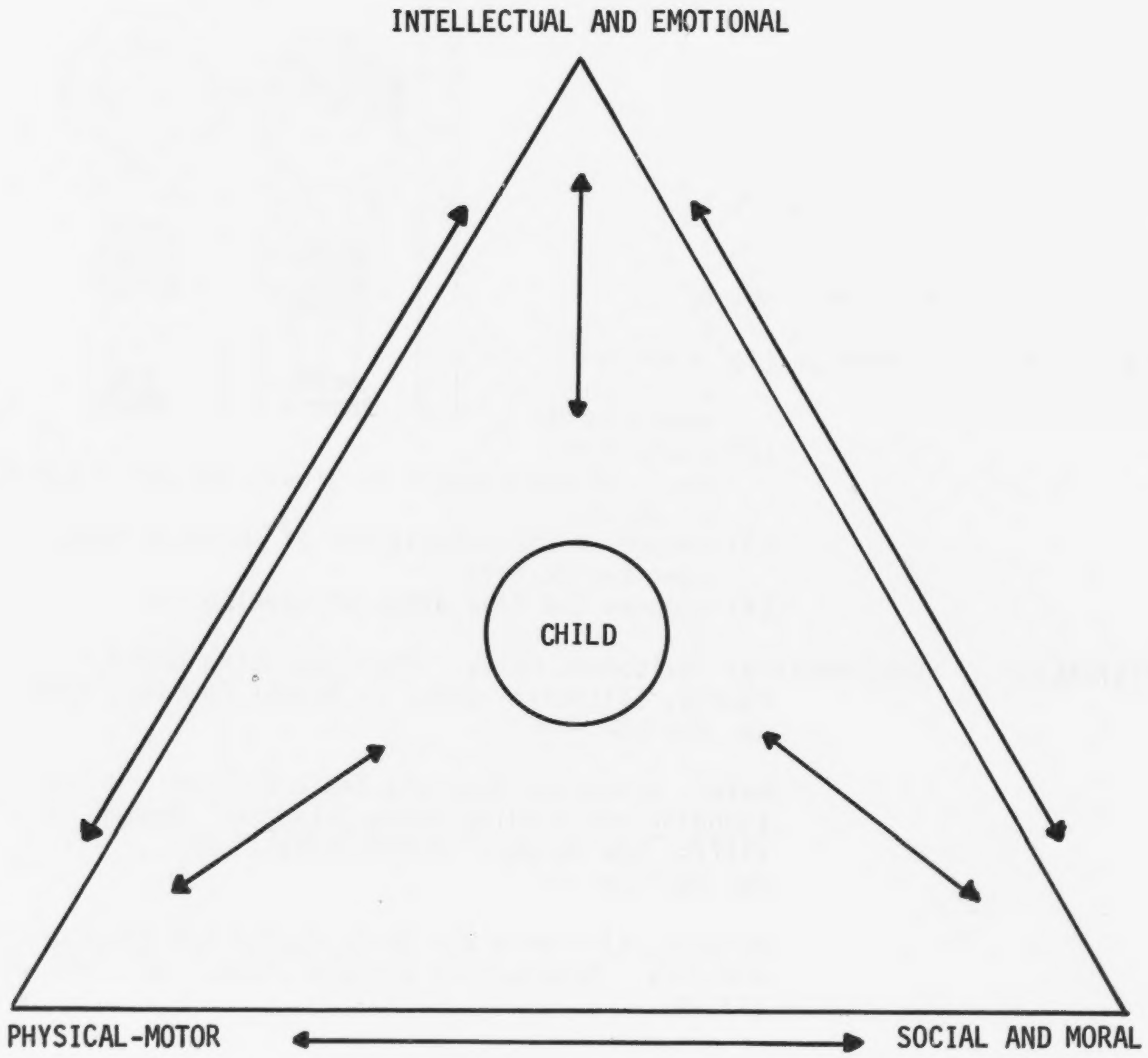
Hurlock, Elizabeth B. Child Growth and Development. New York: McGraw-Hill Company, 1968. pp. 160-169; 177-192.

GROWTH AND DEVELOPMENT

Children grow and develop in five areas--physical-motor, social, emotional, intellectual, and moral. In the developmental process, both the physical growth and the overall development of the child are to be considered. "Growth" is the increase in size and structure of the individual. He may grow mentally as well as physically. "Development" refers to the quality of changes in the individual which lead to maturity.

The chart on the following page shows the interrelationship between the areas of development. What happens to a child in one area affects the other areas. For example, a child's physical development may affect his social adjustment. If a child can compete successfully in games and group activities, he is likely to feel at ease in group situations. As you study the chart, try to think of other ways in which one area of development relates to another.

GROWTH AND DEVELOPMENT


INTELLECTUAL AND EMOTIONAL
CHILD
PHYSICAL-MOTOR
SOCIAL AND MORAL

PRINCIPLES OF DEVELOPMENT

It is important that you, as a child care aide, have an understanding of the basic characteristics or principles of development. These principles are:

- Development is similar for all--The infant's head becomes functional before his hands. He uses his mouth, eyes, and ears before he can grasp objects. He becomes somewhat skillful in using his hands before he learns to control his feet.
- Development proceeds from general to specific responses--The baby waves his arms freely before he is capable of reaching for a specific object.

- * Development is continuous--Although the child appears to grow by "spurts," the growth cycle is progressive. For example, the child's ability to talk does not develop overnight; his speech development proceeds gradually from "gurgles and coos" to words and sentences.

- * Development proceeds at different rates--Some areas of physical and mental development reach maturity earlier than others; therefore, the child's development is never uniform even though it is constant. The head reaches its maximum development earlier than the rest of the body.

- * There is a correlation in development--The physical, intellectual, social, emotional, and moral areas of development are interrelated. The child whose physical development is appropriate for his age level would normally reflect similar developmental levels in the other areas.

In addition to understanding the principles of development, it is helpful to know the following major developmental tasks for children from birth to six years of age as given by Hurlock:[1]

Learning to walk
Learning to take solid foods
Learning to talk
Learning to control the elimination of body wastes
Learning sex differences and sexual modesty
Forming simple concepts of social and physical reality
Learning to relate self emotionally to parents, siblings, and other people
Learning to distinguish right and wrong

WHAT CAN THREE TO FIVE-YEAR-OLDS DO?

Reference: Green, Marjorie M. and Elizabeth L. Woods. A Nursery School Handbook for Teachers and Parents. Sierra Madre, California: Sierra Madre Community Nursery School Association, 1966. pp. 28-30

What can you expect from a three, four, or five-year-old? Where is he along the ladder of growth and development? The assigned reading in Green and Woods summarizes some of the types of things three and four-year-old children can do. A similar list for five-year-olds is given below. Knowing what to expect of the child will keep you from either expecting too much of him or doing too much for him. Remember that these things are goals to work toward. Guide the child toward them, but do not pressure him to attain them.

---

[1] Hurlock, Elizabeth B. Child Development. New York: McGraw-Hill Book Company, 1964. p. 5.

Characteristics of Five-Year-Olds

1. Gets along reasonably well with other children.
2. Takes part in games and other school activities.
3. Recognizes the eight colors.
4. Knows full name, address, birthdate--age.
5. Acts courteously (not interrupt when others are speaking--says please, thank you, and good morning).
6. Gives and follows simple directions.
7. Takes responsibility (helps with school room chores).
8. Faces problems in a constructive way (looks for a lost scarf or hat rather than stand and cry).
9. Expresses ideas through dramatic play.
10. Retells a story, following sequence of events.
11. Tells a story suggested by a picture.
12. Does handwork (cuts, pastes, colors, paints).
13. Knows and is able to say several of each: finger plays, nursery rhymes, poems.
14. Sees likenesses and differences in objects, pictures, and letters.
15. Matches circles, squares, triangles, other shapes.
16. Pays attention, does simple reasoning.
17. Counts to twenty, knows the meaning of one, two, three, four, five.
18. Recognizes small groups without counting.
19. Feels and responds to rhythm.
20. Is able to participate in singing (not all will be ready to sing alone).
21. Recognizes differences in music, such as fast or slow, high or low, loud or soft.
22. Puts on and takes off clothing with a minimum of help.
23. Enjoys looking at books and listening to stories read from books.
24. Profits from trips and excursions.

AREAS OF DEVELOPMENT

The development of a child obviously begins in the home and is influenced by the family into which he was born. Very soon, however, his neighborhood and community become a part of his environment and play a part in his development. An understanding of (1) some of the stages children go through in each area of development and (2) the influence of both the home and outside contacts on the development of the child can be helpful to you as you work with the children at the child care center.

MOTOR DEVELOPMENT

The human infant is considered to be among the most helpless of all young. Motor development is, therefore, an important area and perhaps the area in which development occurs most rapidly. In the very early stages of life, the baby lays where he has been placed and cannot turn his body from one side to the other. He cannot hold anything in his hand. Yet in a few short years the child is relatively independent of help from other people.

During the first few years of life, the child learns to navigate by the use of his gross, or large, muscles. These are the muscles in the arms and legs which are used in walking, running, and swimming. By the time the fifth year is reached, he is learning to control the finer muscles which are used in grasping, writing, and throwing.

If the child has no mental handicaps or physical deformities, he will develop the skills which require the use of teams of muscles. If he does this readily he will make good adjustments, but if he cannot coordinate these teams of muscles, he may develop feelings of personal inadequacy.

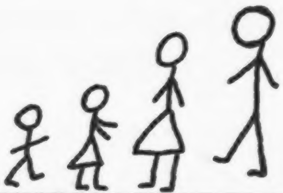
It is important that a child be able to control his body for a number of reasons:

1. It motivates the child to participate in physical activities which serve as an outlet for emotions. This helps the child to relax physically and mentally.
2. It enables the child to entertain himself. He is less likely to demand attention from others.
3. It provides opportunities for the child to develop socially. If the child can enter into activities with capabilities equal to those of his peer group, he will have increased opportunities to participate in group activities. If he cannot compete with his peers, he may become discouraged and refuse to try.
4. It helps the child develop a better concept of himself, for example, if the child can ride his bicycle without someone holding it up for him, he will be more likely to tackle other things without the fear of being unsuccessful.

SOCIAL DEVELOPMENT

At birth the child is neither social nor antisocial. He develops drives to be with people early in the first year of his life. The opportunities he has to be with others, and the guidance he receives from adults play a part in shaping his pattern of social development. The following chart shows the anticipated social development at various "ages or stages" in his life from infancy to adolescence.

DEVELOPMENTAL FRAMEWORK

AGE	STAGES OF LIFE	SOCIAL INTERACTION	PSYCHO-SOCIAL DEVELOPMENT
1-1.5	INFANCY	Mother (Person)s	That sure feeling: Everything is O.K.
2-3	EARLY CHILDHOOD	Father and Mother	That strong feeling: I - I - I
4-5	PRESCHOOL	Family 	That more clean-cut feeling. My plans and ideas
6-11	SCHOOL AGE	Neighborhood	The feeling of importance. I can do it
12-18	PUBERTY AND ADOLESCENCE	Peer Group	The new and old feeling: Who am I really?

Influence of the Social Group

As can be seen in the chart, the first social group for a child is his family; therefore, the family plays an important role in establishing the child's attitudes and habits. For example, if a child is accepted at home, this feeling of belonging will carry over to other groups. A child learns to appreciate and understand people outside the family through contacts with relatives and neighbors. The adjustment a child makes to his family and other social groups is influenced by the extent to which he feels accepted by the family and/or group.

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Social Behavior in Early Childhood

From two to six years of age, children progress from relatively unsocial to distinctly social individuals. During their second year, they are still dependent and rely upon adults. When they reach two-and-a-half to three years of age, they begin to resist the influence of adults and what to be independent. At four or five years of age, they become cooperative as they begin to seek approval from adults. Gradually, they spend less time with adults and begin to enjoy being with people outside the family.

Their relationships with other children gradually change, also. Before two years of age, their play is primarily solitary. During the second year, parallel play begins, and during the third and fourth years, there is an increase in social play. The size of the group also increases with age. Children usually go through the following forms of social participation:

Unoccupied behavior - birth to 2 or 3 years
Parallel activity - 2 years
Associative play - 2 years
Onlooker behavior - 2-1/2 to 3 years
Solitary independent play - 2-1/2 years
Cooperative play - 3 years and up

At two to three years of age, the child is self-centered, but by three to four years, there is an increase in cooperation. Ascendant behavior, the tendency to dominate, or "bossiness," is nearly universal among young children. It is especially common among children whose parents show dissatisfaction with the way the child meets their requirements and who show little understanding and affection for the child.

EMOTIONAL DEVELOPMENT

The emotional development of children is often difficult to observe. Emotions involve feelings, impulses to act, and the subjective impulses that produce the feelings. As children mature, society expects control of the visible expression of emotions.

The development of emotions tends to proceed in cycles. The timing of the phases and the intensity of the emotions vary from one individual to another. The child is usually unpredictable at eighteen months, becomes easier to manage at two, more difficult to handle at two-and-a-half, and trusting at three. The frustrated four-year-old often boasts, argues, fights, engages in name calling, and bosses as he attempts to fit into society. The fascinating five-year-old emerges into a contained, conforming period. His relations in and out of the home become more congenial as he finds his place in society.

Anger takes different forms at different times. The hitting temper tantrum of the young child gives way to threatening and name calling. By the time the child is four, anger occurs chiefly due to differences with brothers and sisters or with peers. Retaliation is often expressed by threats, imaginary harm, or hitting another person or object.

Brother and sister rivalry is the most common cause of jealousy in the early stages of childhood. Between the ages of two and five, the child may find it difficult to understand that the attention given to another child does not mean a lack of affection for him. It takes time to learn that love can be shared.

Common childhood fears include fear of animals, of being left alone, of falling, of loud noises, and of strangers. Anything that occurs suddenly or unexpectedly is likely to frighten a child. As the child's intelligence develops and he understands what is happening, his fears begin to decrease.

Affection gradually transfers from self-interest to family, toys, pets, and outside relationships. Crying and whimpering at another's distress is changed to soothing and removing the cause.

Until age two or three, children express their emotions freely and without restraint. As the child grows older, experiences broaden and additional emotions are felt and expressed. Children begin to learn to control their emotions in the four to six-year-old period. As they continue in their emotional development, they learn to express love and to handle their feelings of anger, fear, and jealousy.

For additional information on emotional development, see Hurlock, Child Growth and Development, pages 309-322, if this reference is available.

COGNITIVE OR INTELLECTUAL DEVELOPMENT

One of the factors involved in intellectual development is the formation of concepts. Some of the principles of concept development are discussed below.

Concepts Are Individualized

The ideas children have are individual in that all children do not understand situations or objects in the same way because of different socio-economic backgrounds.
EXAMPLE: A dollar bill was given to a group of children for observation. They were asked to return the money in two minutes. They were told to draw and color a picture of the dollar bill. The children in the lower socio-economic group described the bill as larger and colored it a brighter green than those in the higher socio-economic group.

Concept Development Follows a Pattern

Children's concepts move along continuously from simple to complex, from concrete to abstract, from separate unit to organized unit, from egocentric to more social (from I to we).

EXAMPLE: At first the concepts of a flag are vague and general. It belongs in a class of objects with stars. Later the child thinks of the flag as representing different countries. By the seventh or eighth year, he regards the flag as a symbol of a country. By twelve, the child is saying the pledge of allegiance with understanding.

Concepts Are Hierarchical

At twenty-six months children are able to grasp the first hierarchical concepts. They are able to understand, for example, that "men" and "women" are "people." About the middle of the fourth year, they enter the second hierarchical period and they are able to grasp the concept that "potatoes are "vegetables" and "apples" are "fruits" and both "vegetables" and "fruits" are food.

Concepts Develop from Undefined to Specific

Children have vague concepts which become more specific as they grow older. The young child does not notice details as quickly as he sees whole objects.
EXAMPLE: The response of a young child when defining "gown" would be clothes to wear, while the older child would be more specific, as an evening dress.

Concepts Develop from Specific to General

As previously stated, the child's first concepts are vague and he cannot relate them to other concepts. He cannot put them into categories. With experience he is able to recognize parts of objects and to put into one group those objects which are similar. In this early stage the object's structure and its function play an important part in the child's understanding of its meaning.
EXAMPLE: The child notices that pennies, nickels, and dimes are a common element which is known as "money." He categorizes them into a general concept--"money."

Concepts Are Cumulative

The child builds new meanings on old. In building concepts the child makes new associations with knowledge acquired earlier.
EXAMPLE: The child learns that his cat is a Siamese. He sees a television show and finds out that the markings on the cat make it a Blue Point Siamese. He also finds out there are many different species of cats, both large and small, both domesticated and wild, yet all are cats.

Concepts Are Emotionally Weighed

All concepts are weighed emotionally--in other words, concepts are formed through experience, and become of value to the child as they affect him in different ways. In general, if the concept concerns the child or things related to the child, it is of more value than the concepts of a more

objective nature.
EXAMPLE: A child who has been forced to drink milk will have a different concept of milk than he would have of a beverage he has not been forced to drink.

MORAL DEVELOPMENT

The moral development of children is determined primarily by their environment. Of the many factors affecting morality, the following will be discussed: the family, playmates, sex, and religious instruction.

The Family

Parents and other family members influence the child in four distinct ways:

1. The family's behavior serves as a model for the child to imitate.
2. The family teaches the child to behave in a socially desirable manner by use of approval or disapproval, reward or punishment.
3. The family teaches the child to recognize the severity of his misdeeds by planning the punishment to fit the misdeeds.
4. The family motivates the child to do what is right.

Under normal conditions a child admires his parents, relatives, and older brothers and sisters and accepts their conduct as his standard. If the conduct of these individuals is desirable and discipline is consistent, the child will develop moral competence in the form of self-control and self-direction. If, on the other hand, the conduct of family members is undesirable, the child is likely also to adapt to this type of behavior.

The socio-economic status of the family plays an important role in moral development. Children from all socio-economic levels may cheat, lie, and become truant; such behavior, however, is more common among the lower socio-economic groups. The socio-economic status of the family influences the developmental background of the child, determines in part what moral values will evolve, and provides patterns of moral behavior for him to imitate.

Playmates

When the child develops a "group feeling," he is becoming independent of adult rules. Even among nursery school children the influence of companions is powerful enough to cause children to deviate from parental attitudes. Group influence is more powerful if the group is small and closely knit, and is greater when the group is together than when members are separated.

Sex

No evidence is available that boys and girls differ in morality if they receive similar moral training. Because of their rebellious attitudes, boys are likely to misbehave more than girls. Mothers tend to be more lenient toward boys because our society, in general, does not expect the same behavior patterns of boys that it expects of girls. Boys value deviation among others in their peer groups because of the "masculine" image they think this presents.

Religious Instruction

This influences the child's moral development, first by shaping his ideas about the importance of specific values and ideals, and second, by reinforcing the moral code he has learned.

The teaching of religious subjects and principles is primarily the responsibility of parents. The detail of religious teaching and its application to everyday life must be presented and applied according to the child's age.

Age 3
- May be taught to recite short prayers
- There is little evidence that prayers mean much more than nursery rhymes

Age 4
- Many seem to have casual acceptance of the concept of God
- Answer the child's "why's" simply

Age 5
- Continues a restricted practical interest in God

Age 6
- Religion becomes more meaningful and personal and is often viewed with awe and wonder

Typical behavior patterns of young children for several traits are given below:

Truthfulness

Age 4
- Little distinction between fact and fancy
- Parent need not be overly concerned

Age 5
- Begins to distinguish between reality and fantasy and know when he is fooling
- Needs help in identifying "pretend" and "real"

Age 6
- Ethical sense sprouting
- May deny misbehavior when confronted with the evidence

Boasting

Age 4

Naturally claims to be "biggest, best, smartest"
Awareness of self is growing

Age 6

Often says "that's easy for me"
Too much boasting sign of insecurity; help child feel sense of accomplishment so he will not need to boast
Boasting should begin to diminish

Admitting Wrong Doing

Age 6

Average child is not mature enough to admit wrong doing
Untactful questioning may push child into lying

Cheating

Age 6

Average child, if put in competitive situation, will cheat more often than not
Quick to complain if others cheat

QUESTIONS:

1. What are the five areas in which children develop?

2. List at least six developmental tasks that, according to Hurlock, children three to five years of age should be able to accomplish.

True or False:

3. Development refers to qualitative changes in the individual.

4. During development, constant changes are occurring at the same rate.

5. Knowing what the pattern of normal development is enables us to know, in general, what to expect of a child at a certain age.

Multiple Choice:

6. Parents and teachers have responsibility for providing an environment in which children
   a. can learn the most.
   b. can grow the fastest.
   c. can reach their potential.

7. Development is
   a. a continuous and orderly process.
   b. not continuous, as children stop growing at times.
   c. not an orderly process, as every child is different.

8. Growth in the area of motor control tends to proceed from
   a. refined movements to overall body activity.
   b. gross body activity to specific movements.
   c. coordinated movements to uncoordinated movements.

Matching:

The child's social development is influenced by his experiences with others from very early stages in his life. For items 9-13, match the principal persons with whom he interacts at the various stages of his life.

SOCIAL INTERACTION	STAGES OF LIFE
9. Mother	1. Infancy
10. Peer group	2. Early childhood
11. Family	3. Preschool
12. Mother and father	4. School age
13. Neighborhood	5. Puberty and adolescence

In the developmental process, certain characteristics or principles are basic in both the physical growth and the learning process. Match the developmental principles with the characteristics of the child in items 14-17.

DEVELOPMENTAL PRINCIPLES	CHARACTERISTICS
14. All children follow a similar pattern of development.	1. Creative ability proceeds rapidly during early childhood with reasoning ability progressing at a slower rate.
15. Development is continuous, but it proceeds at different rates.	2. The infant's head becomes functional before his hands.
16. Stages of maturity are correlated.	3. A baby says words and phrases before he uses sentences.
17. The plan of development proceeds from general to specific.	4. The child's mental and physical abilities usually correspond to his age level.
	5. The child crawls before he walks.

For items 18-26, match the behavior with the age at which you would first expect it to occur.

BEHAVIOR

18. Can dress with a minimum of help
19. Speaks in two and three word sentences
20. Knows several songs but often gets out of tune
21. Tells a story suggested by a picture
22. Likes to boast; is often bossy
23. Can build elaborate block structures
24. Faces problems in a constructive way
25. Talks a great deal
26. Plays next to, but seldom with, other children

AGE

1. 2 years old
2. 3 years old
3. 4 years old
4. 5 years old

27. In your own words, discuss the importance of a child learning to control his body (motor development).

28. At what age do children begin to learn to control their emotions?

In questions 29-32, which principle of concept development is described?

29. Child would recognize that cats and dogs are animals.
30. Two children draw something different when asked to draw a house.
31. Child calls a passing vehicle a "Pontiac" instead of a car.
32. One child likes orange juice and another child does not.

33. What influence does the family have on moral development in children?

ASSIGNMENT:

I. Record the following information for three children at the child care center where you are working. Try to account for any variations that you may observe.

	Child 1	Child 2	Child 3
Age			
Sex			
Height			
Weight			
General Physical Appearance			

II. If any of the supplementary references listed at the beginning of this subject area are available, discuss with your teacher which of the activities suggested at the end of the chapters would be best for you to do.

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UNIT IV-1

THE CHILD IN A CHILD CARE CENTER

SUBJECT: What's She Doing Here?

TASK: Helps to promote parent interest in the child care center

OBJECTIVE: Be able to evaluate parent-center relationships

REFERENCE: Read, Katherine. The Nursery School, A Human Relationship Laboratory. Philadelphia, Pennsylvania: W.B. Saunders Company, 1966. pp. 339-358.

A child care aide must realize the importance of interacting with mothers and fathers as she thinks through her own role in the center. Parents' attitudes are a composite of their backgrounds, and they will approach this first school experience for their child with different needs and different feelings. Some parents are eager to assume their role in the child's life at school and feel at ease in doing so. Others may have a feeling of insecurity and need support in what they do concerning their children. Some parents may feel a need to justify their child rearing practices, and other parents may regard the center as merely a place to leave their children while they follow their own pursuits. Each of these attitudes must be accepted in an unbiased and objective way.

ASSIGNMENT:

Use the following questionnaire to evaluate the parent-center relations at your training station. What can you do to help with the activities planned for the parents? Discuss your conclusions with your teacher.

PARENT-CENTER RELATIONS

What plans or activities have been worked out in regard to:
- Visits of fathers and mothers to the center?
- Teachers' visits to children's homes?
- Fathers and mothers helping teachers with center activities?
- Maintaining contact with fathers and mothers who can seldom come to the center?

What plans or activities have been worked out in regard to:
  Reporting children's progress to parents?
  Sharing timely and interesting books, pamphlets, and films with the fathers and mothers?
  Helping fathers and mothers understand their children's needs and interests?
  Helping fathers and mothers enjoy their children?
  Helping fathers and mothers become more relaxed with their children?

What plans or activities have been worked out in regard to:
  Sharing center problems and interests with parents?
  Planning parent meetings and gatherings on a short term basis?
  Planning parent meetings and activities for long term needs and study?

What plans or activities have been decided upon with regard to:
  Working out director's and other staff member's responsibilities to parents?
  Working out staff and parents' responsibilities for better community services and facilities for children?

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UNIT IV-2

THE CHILD IN A CHILD CARE CENTER

SUBJECT: Who's Afraid of the Big Bad Wolf?

TASKS: Helps the children accept the center and participate in its activities

Assists the children in developing a sense of "belonging" at the center

OBJECTIVES: Be able to
(1) recognize procedures which help children adjust to the child care center
(2) relate center experiences to needs of children
(3) recognize the significance of center experiences

REFERENCES: Green, Marjorie M. and Elizabeth L. Woods. A Nursery School Handbook for Teachers and Parents. Sierra Madre, California: Sierra Madre Community Nursery School Association, 1966. pp. 18-20.

Read, Katherine. The Nursery School, A Human Relationship Laboratory. Philadelphia, Pennsylvania: W.B. Saunders Company, 1966. pp. 107-135.

CHILDREN'S ADJUSTMENT TO CENTER

As a child care aide, you may be responsible for helping the child accept the child care center and become oriented to the schedule of activities. In performing these tasks, you may greet the child as he enters the center and help him to fit into group activities or interest him in doing something by himself.

Generally the young child looks forward to going to the child care center. He may, however, have mixed emotions about leaving the security of his own home. Just as the child care aide must become oriented to the center and the schedule of activities, so must the child go through a period of adjustment as he enters this "new world" of social relationships and interactions.

The child's home environment has been instrumental in shaping his early life; however, the child must eventually be separated from the home and the mother's constant care. The child care center offers one means of expanding the child's learning experiences away from home. It gives the child his first real acquaintance with community living beyond the familiar range of living with the family and playing with children in the neighborhood.

An important objective of the child care center, therefore, is to provide an environment in which the young child can grow and develop. The environment should help each child learn that other adults and children can be trusted and that he can feel safe away from his own family.

Each child who comes to the child care center differs in many ways from the other children. No two children are alike physically or mentally. They react differently to the new environment. They do not enter into the same play activities. Some have had fewer experiences with others outside the home and lack self-confidence in their attempts to participate in the group activities. Some of the children require more time than others in becoming acquainted with the center schedule, its facilities, and the staff.

Each child's adjustment to the child care center is determined largely by his pattern of individual growth and his background of experience. When the child enters the center, he is surrounded by new people and new experiences. He must find ways of adjusting to the situation and becoming oriented to those about him. He seeks familiar activities which he enjoys and new opportunities which he can explore. He generally responds to the friendly teacher or child care aide who is genuinely interested in him.

He should be made to feel that he is well-liked, that people around him are friendly, and that the world is an interesting place in which to live. If the child feels that no one likes him, he may develop insecure feelings. He may feel uncomfortable about himself. He may become afraid of people, places, and experiences. He may be unhappy and have difficulty adjusting to the program at the child care center.

Fear may be an important factor affecting the child's willingness to participate in the center activities. Fears may vary at different stages in the child's life. As the child develops, new things affect him because his perception becomes keener. Fears are likely to develop when he views a new situation as a potential danger to him. Although his fears may disappear quickly, they may occur again. As the child learns his way around the center, his fears begin to disappear. He becomes more independent in his relationships and begins to develop a sense of "belonging" in the center.

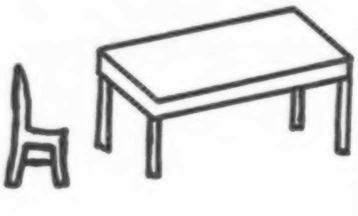
Suggestions for helping a child adjust to the child care center are:

1. Plan a simple schedule of activities aimed at helping the child become acquainted with facilities of the center.
2. Talk with each child and use his name--"What a pretty shirt you have, Johnny. You must like blue, as I do. See your shirt and my scarf are both blue."

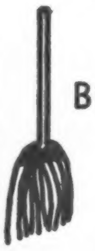
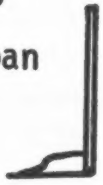
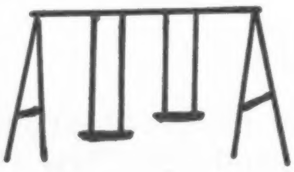
3. Introduce the child to simple daily routines which will remain constant--juice time, rest time, putting toys away. Children must learn a routine before they can learn variations.
4. Let children have opportunities for free-choice activities.
5. Read or tell a story which links the center with the home.
6. Reassure the child by explaining that adults are there to help.
7. Support the child in a quiet, confident tone of voice during times when he appears to have anxieties.
8. Encourage the child to participate with the group, but do not try to force him.

If the child care aide recognizes the significance of the various activities which make up the child care center program, she will be able to help the child become oriented and insure that his needs are being met. The following chart helps to relate the center facilities to the child's needs and the concepts which he should be forming as a result of the experiences at the center.

THE CHILD CARE CENTER MEETS CHILDREN'S NEEDS

Children's Needs and Concepts	Facilities	Equipment and Supplies
Needs: Food Concepts: Color Shape Number Temperature Texture	Facilities to prepare food for mealtime and snacks 	Refrigerator Cooking equipment Serving dishes Food Napkins
Needs: Water Concepts: Pressure Wet Dry Manners	Drinking fountain at child's height both indoors and outdoors	

Children's Needs and Concepts	Facilities	Equipment and Supplies
Needs: Rest Concepts: Quiet Bedding Sleep Rest	A room with shades so that they may be pulled to darken the room	Stack cots Blankets Sheets
Needs: Health Concepts: Illness "Well" Nurse Doctor First Aid Pain	A separate room and a storage place for supplies out of reach of the children	A cot with sheet and blanket Washable, cuddly toys First aid supplies
Needs: Toileting Concepts: Cleanliness Responsibility Independence	Child size toilets and lavatory	Large steps or blocks to help child reach adult fixture Soap Paper towels
Needs: Play Concepts: Rhythm Numbers Directions Rules Order Sharing Reasoning	Paved surface that is sheltered Space indoors for play activities	Slide Wagon Tricycle Sandbox Record player Clay Tin cans to smash Punching balloon

Children's Needs and Concepts	Facilities	Equipment and Supplies
Needs: Feeling of safety Concepts: Dangers Fears Order Security	Firmly secured play equipment Fenced playground	Magnet for picking up nails  Broom and dustpan 
Needs: Security Concepts: Pleasure Neatness Accomplishment	Items parents consider necessary	Apron (coverall) for painting Something to take home
Needs: Feeling of belonging Concepts: Housekeeping Acceptance Plenty	A place for the child to hang his jacket and a place to put personal things	Enough materials or toys so that a child will not have to experience unnecessary waiting
Needs: "I can do" feeling (Adequacy) Concepts: Ability Share Recognize	Jungle gyms, swings, sandboxes 	Toys and equipment suitable for different age levels Toys with which children are familiar
Needs: Strong feeling I - I - I (Self-realization) Concepts: Group Different Participation	Variety of outdoor play equipment 	Toys that challenge each child Equipment and toys appropriate for each age level

WHAT DOES THE CHILD CARE CENTER TEACH?

In spite of the excellent educational record of child care centers, some people still think that "the children only play and don't really LEARN anything." Here are a few of the concepts and attitudes taught in child care centers which illustrate the significance of the experience for children.

Quantitive Concepts

The teacher carefully guides the children into systematic number thinking. Through counting blocks and taking turns they gain an understanding of numbers.

Children learn to understand "more, less, bigger, smaller, taller, shorter, heavier, lighter" through practical situations. They measure one thing against another, e.g. two small blocks equal one large block.

They learn "before, after, soon, now, morning, afternoon, yesterday, today, and tomorrow." The names of months become familiar and they come to think of the year as a succession of four seasons and a recurrence of familiar holidays.

Language Training

Children are encouraged to talk with adults and with each other, thus, learning new words and gaining skills in communication. Vocabulary is also built through carefully planned new experiences, such as group discussions, language games, and the telling and reading of many stories and poems.

An interest in reading is cultivated as a result of attractive and suitable books which are made available for the children's enjoyment. The proper care of books is also taught.

Foreign speaking children acquire a basic knowledge of English in pleasant, informal situations. They lose their fear of learning a new language.

Scientific Information and Habits

Children learn about (1) the physical properties of things around them, (2) their own bodies, and (3) "how things work." They learn what makes a structure stable, how to steer wheeled vehicles, how a lever (see-saw) operates, and how to use a pulley, magnet, and magnifying glass.

They learn about the needs, habits, and life cycles of various plants and pets, and about wind, weather, heat, and other natural forces.

Appreciation of Art and Music

Music: Children learn to enjoy listening to music, singing songs, playing simple instruments, and creating music through rhythmic responses.

Art: They learn how to express themselves through the creative use of various art materials.

Sensory Training

Through guided observation, they learn to notice differences and similarities in color, shape, and pitch. Visual acuity and eye-hand coordinations are taught through puzzles, games, and the study of pictures. Auditory training comes through music, language, and other activities.

Social Attitudes

They develop favorable attitudes toward one another, toward teachers, and toward learning. They also develop the ability to function in a group, to listen to others, to wait for one's turn, to cooperate, to assume responsibility, to concentrate on a task, and to follow directions.

QUESTIONS:

1. What concept is being taught through the song, "One Little, Two Little, Three Little Indians"?

2. What kinds of experiences in the child care center help children to develop language skills?

3. After Mark's mother left him at the child care center, he stood watching the other children but did not enter into the activities with the other children. How could one involve Mark in the play period?
   a. Say: "Mark, don't stand there and watch the others. Come and play..."
   b. Tell the other children to ignore Mark and he will overcome his shyness soon.
   c. Bring some blocks and ask Mark if he will help you build a bridge.

4. Mike is an only child and on his first day at the child care center, he clung to his mother and was almost in tears as she started to leave. The teacher should
   a. insist that he join a group of children who are playing outdoors.
   b. suggest that the mother stay for awhile.
   c. suggest that the mother leave, that Mike will be all right.

5. As a child care aide, what are some ways you might help a child to develop a sense of "belonging" in the center?

6. What may cause a child to develop insecure feelings?

7. What should the environment at a child care center help a child to learn?

ASSIGNMENT:

Select at least six of the needs illustrated on the charts on pages A-59 through A-61. Think about the activities you have observed and participated in and describe experiences the children have had that would lead to the development of the concepts listed under the needs. For example, have any comments been made about the color of food during lunch time?

Home Economics
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Lubbock, Texas

UNIT IV-3

THE CHILD IN A CHILD CARE CENTER

SUBJECT: I Can Do It!

TASKS: Assists the children in developing a sense of "belonging" at the center

Helps the children learn acceptable behavior patterns

OBJECTIVES: To be able to
(1) recognize adult behavior which will contribute to a child's feelings of adequacy and security
(2) interpret children's actions in terms of their feelings of security and adequacy
(3) analyze own behavior as to whether or not it helps to meet the basic needs of the children

REFERENCES: Read, Katherine. The Nursery School, A Human Relationship Laboratory. Philadelphia, Pennsylvania: W.B. Saunders Company, 1966. pp. 167-195.

Bradley, Helen and Gahagan, Jayne. The Child's Small World. Elgin, Illinois: David Cook Company, 1967. pp. 14-35.

Many questions about how to handle the children and help them develop mentally, physically, and emotionally will probably race through your mind during a day at the center. The role of the teacher and her staff in building feelings of security and adequacy in children is a most important one. Some guidelines for working effectively with children are given in the above references.

Earlier you learned that a child's basic needs must be met if he is to develop a healthy self-concept or sense of self-worth. It is, therefore, necessary that these needs be met in the child care center as well as in the home.

The reference, The Child's Small World, by Bradley and Gahagan, was written especially for teachers who would be working with children from disadvantaged homes. The basic information on children's needs can, however, be helpful when working with any group of children.

QUESTIONS:

1. What do the terms "security" and "adequacy" mean?

2. Which of the following have an influence on a child's feelings of security and adequacy?
   a. His experiences with feeding
   b. The way his basic needs are met
   c. The way other people treat him
   d. His experiences as he explores his world

3. When children are made to feel they are to blame for things that happen, how will this affect their feelings about themselves?

4. A child who is "spoiled" is one who
   a. gets his own way all the time.
   b. gets attention when the adult wants to give it.
   c. seldom receives any attention from adults.

5. Billy overheard the child care aide, Betty, say to another teacher, "Billy is such a problem. His mother told me he would push the other children around and she was certainly right. I don't know what to do with him." A little later, Billy pushed Johnny off the teeter-totter. Which of the statements below might help to explain his behavior?
   a. He was a spoiled child and used to having his own way.
   b. He was mad at Betty and wanted to get even with her.
   c. He behaved as he felt adults expected him to behave.

6. Johnny was playing with finger paints and having a great time. However, he was getting paint all over his apron and the newspaper around the paper he was painting on. Kay wanted to stop him and calm him down, but Bana though that what he was doing was all right. How could you describe Kay's and Bana's attitudes?
   a. Kay was permissive and Bana indulgent.
   b. Kay was restrictive and Bana permissive.
   c. Kay was indulgent and Bana restrictive

7. How would you describe the difference between permissive and restrictive attitudes toward a child's behavior?

8. The child care aide has noticed that Jimmy has a tendency to stutter and mispronounce some words. She should
   a. encourage him to stop and speak more slowly.
   b. listen attentively when he talks to her.
   c. ask him to repeat after her the words he mispronounces.

9. a. What does Dr. Plant (Read, The Nursery School) mean by "nudging" children?
   b. Does he recommend doing this? Why or why not?

10. What is the first step in understanding the meaning of behavior?

11. What are five clues to a child's feelings which can be observed?

12. What is the most important thing you can do to help a child feel secure and adequate?

13. What are four things children can be guided to do to help drain off negative feelings?

14. Briefly summarize some of the things you can do to increase the children's feeling of adequacy and security at your training station.

ASSIGNMENTS:

I. Describe a situation in which the guidance given to a child helped him to feel more secure and confident.

II. Review the sections in Bradley and Gahagan at the end of the discussion of each need entitled, "The Adult Provides." As you carefully read these sections, ask yourself whether or not you have done any of these things which could help to meet the basic needs of children. Select several of these suggestions and think about how you could carry them out at your training station. Keep a record of what you do and of the child's reaction. Show this to your teacher and discuss your experiences with her.

Home Economics
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Lubbock, Texas

IV-4

UNIT IV-4

THE CHILD IN A CHILD CARE CENTER

SUBJECT: Oh, Boy, Here We Go Again! He Did It!

TASK: Helps the children learn acceptable behavior patterns

OBJECTIVES: Be able to
(1) list purposes and types of discipline
(2) recognize acceptable behavior patterns
(3) suggest ways of guiding the behavior of children
(4) identify factors which influence behavior of children
(5) analyze situations in which various forms of guidance are used

REFERENCES: Required:

Green, Marjorie M. and Elizabeth L. Woods. *A Nursery School Handbook for Teachers and Parents. Sierra Madre, California:* Sierra Madre Community Nursery School Association, 1966. pp. 24-27; 74-84.

Read, Katherine. *The Nursery School, A Human Relationship Laboratory.* Philadelphia, Pennsylvania: W.B. Saunders Company, 1966. pp. 89-106; 196-247.

Supplementary: Baker, Katherine Read and Xenia F. Fane. *Understanding and Guiding Young Children.* Englewood Cliffs, New Jersey: Prentice-Hall, Inc. 1967. pp. 142-150.

Child Guidance Techniques. College Station, Texas: Texas A & M University, Texas Agricultural Extension Service, 1968.

DISCIPLINE

The goal of discipline is to guide the child in his behavior in such a way that he develops an inner control and is able to make wise decisions which show regard for the rights of others. In other words, the child develops self-discipline and is able to control his own behavior.

Discipline helps the child *learn acceptable social standards*. Since young children tend to be self-centered they must be helped to *develop respect for the rights of others*. Discipline gives the child a *sense of security* in that he needs and wants to have limits set. He depends on adults to keep him from doing what is not acceptable. Further purposes of discipline are to protect the child from bodily harm and to promote his health and well-being.

One definition of discipline is "instruction designed to train proper conduct or action." This definition would seem to imply that the best kind of discipline is based on the idea of guiding the child toward acceptable behavior and thus preventing misbehavior rather than placing the emphasis on punishing the child after he has done something wrong. Many people think of punishment when the word discipline is mentioned, but as indicated in the preceding sentences, discipline is a much broader term. It places the emphasis on guidance and prevention of misbehavior, not on punishment.

Adults' patterns of discipline (or guidance) fall into three major categories. One type is called "adult control" and is used by adults who expect blind obedience and give the child no opportunity to learn to think for himself. In direct contrast to this is the "child control" when the adult offers very little guidance and the child is left to do as he wishes. The ideal situation is "democractic control" when the adult gives guidance as it is needed and helps the child to begin to make his own decisions. Further information about these three types of discipline is given in the chart on p. A-71.

When situations of misconduct do arise, however, the child as an individual should be considered, as well as his age level and the behavior which is characteristic of children his age.

Questions to ask when looking for a solution to problems of misbehavior are:

What did the child do?
Why did he do it?
Did he know better?
Did he wish to do wrong?
How can the fault be corrected?

When answering these questions, one must remember to consider the child's knowledge and attitude toward the situation. Children sometimes misbehave unintentionally because they do not know what is right and wrong in a particular situation. One factor in determining the method which should be used to handle the misbehavior will depend upon whether or not the child knows the behavior is wrong. If he does not know it is wrong, the method of discipline used should help him understand why it is wrong and what is acceptable behavior in that situation. Another factor to consider is the attitude of the child. Does he desire or wish to do what is right or does he deliberately misbehave? If he deliberately misbehaves, the method used to handle the situation would be different than if he is trying to behave in an approved manner.

TYPES OF DISCIPLINE

QUESTIONS	ADULT CONTROL	DEMOCRATIC CONTROL	CHILD CONTROL
What is the object?	Blind obedience is expected of the child	Child learns to "go it alone" Self or inner control	Child is free to carry out own desires
Who provides the authority?	Parent or adult "Outer" control	Parent and child "Inner" control	Child No authority No control
What does the child learn?	Protection by adults in dangerous or emergency situations	To think for himself and to work with others	To disregard others' rights Becomes overaggressive
What kind of adult does this produce?	Dependent Submissive Rebellious	One who is able to make wise decisions for himself, with regard for others' rights	Independent Confused Lawless
What is the effect on citizenship?	Willing to be controlled by others	Prepared to live in a democractic society where all contribute	Social chaos, easily led by radical leaders

GUIDANCE SUGGESTIONS

Love is the basis of effective discipline. Within the framework of love, then, these practical rules are worth remembering:

* Good discipline is based upon the establishment of a routine. The child needs to know what to expect whether at home or in school.

* Insist on the important things. The important things will not be the same for all situations, but all centers have some things that are supposed to be done. Insisting on the important things helps the child to feel secure. Some disciplinary situations are best managed when one knows what he should not be concerned about or what not to interfere with--"planned ignoring." This helps to prevent a continual negative interaction between the adult and the child.

* Be consistent. A child needs to know what he can and cannot do. He needs to know what punishment to expect when he is disobedient. A child learns best if all workers cooperate on discipline. Consistent discipline helps the child to learn self-discipline.

* Let the punishment fit the crime. Let the reward fit the good deed, also. If punishments and rewards fit what the child has done, he understands them better and feels more secure.

* Let children see the results of their behavior. When children understand the consequences of what they do, they are on the way to self-discipline.

* Explain what is happening. As soon as the child is old enough to understand, give reasons for expecting certain types of behavior. Reasoning aids in the development of self-discipline.

* Use positive rather than negative suggestions or statements. For example, say: "Close the door gently," not "Don't slam the door."

* Use encouraging rather than discouraging statements: "You can do it," not "Is it too hard?"

* Use specific rather than general statements: "Put on your socks; now your shoes," not "Put on your clothes."

* Use pleasant requests rather than scoldings: "You will need to pick up your materials now," not "Get those things picked up."

* Use substitute suggestions rather than negative commands: "Use that pencil from the drawer over there," not "Don't use that."

* Use unhurried directions rather than hurried commands: "You can do it quickly," not "Hurry up!"

* Where there is really a choice, give the child a choice of activities: "Would you like to paint or read now?" not "Read now."

- Use manual guidance to aid verbal suggestions with the young: "Let's sit down here," not "Sit down."
- Keep verbalism to a minimum; listen more than you talk. Keep the voice down, and expect calm not calamity.
- Avoid issues with children. Discuss misconduct in private.
- Avoid making threats. If threats are not followed through, undesirable behavior is reinforced. If you must carry out threats, everyone is hurt.
- Isolate hyperactive children when necessary, not as a punishment but to decrease stimulation. Help the child to understand why.
- Stimulate the shy and withdrawn children. Provide opportunities for success and praise the child when he is successful.
- Give repeated fair warnings. Small children's retention spans are short.
- Never disregard the child's rights and dignity. Discipline should never be an outlet for the worker's anger, but relevant to the behavior involved.
- Be prepared to repeat over and over again and handle each problem as if it were the first and only one. The small child (toddler) cannot "transfer" learning.
- Remember that the most difficult, hostile child is the one who needs love and guidance the most.
- Always have a stimulating classroom environment. This helps prevent behavior problems.
- Do not make a crisis of everything. Learn to remain calm in all situations.
- Punishment is not always the answer.
- Do not make quick diagnoses or snap judgments.
- Do not show feelings of anger and frustration toward the children.

HOW TO COMMUNICATE

The child care aide should realize the importance of communication in relation to guidance. The following suggestions may be helpful as you work with the children and try to guide them toward acceptable behavior.

1. RECOGNIZE THAT GOOD COMMUNICATION IS THE KEY TO GETTING ALONG.
   A conscious effort must be made to learn to communicate effectively with children.

2. ACCEPT THE CHILD'S NEED TO CONTROL YET EXPRESS HIS ANGER.
   One must help children learn that anger is natural. It is healthy and wise to express these feelings in outward, acceptable ways instead of keeping them pent up, being destructive, or hurting others.

3. LEARN TO LISTEN WITHOUT PRECONCEIVED OPINIONS IN ORDER TO UNDERSTAND WHAT IS BEING SAID.
   Hear the children out completely. Listen to them from their points of view in order to avoid short-circuiting the lines of communication.

4. STAY TUNED IN WITH THE RIGHT TONE OF VOICE.
   Sarcasm, preaching, and unpleasant tones of voice turn off communication.

5. LEARN TO SPEAK TO THE CHILD'S FEELINGS, NOT TO THE WORDS.
   Strive always to decode the underlying message. Help the youngster find his own answers by asking questions in return.

6. KEEP PRIVILEGED COMMUNICATION CONFIDENTIAL.
   A child is entitled to choose his own trusted confidant. If belittled and laughed at, he will tune you out.

7. DO NOT WORRY OVER MISTAKES, BUT BE TAUGHT BY THEM. LEARN TO LAUGH, LOVE, AND TO BEGIN ALL OVER AGAIN.
   Children are complete human beings. Some are easy to guide, some difficult. Mistakes are made, but worry is fruitless. The right attitude leads to success.

METHODS FOR HANDLING COMMON PROBLEMS

Child is angry

Causes: Being told "no", "stop", or "don't" too often
Prevented from doing something he wanted to do
Too many demands made upon him

Do Not: Become angry yourself
Try to reason or talk with him during a temper tantrum

Do: Find a safe outlet for his feelings, such as a vigorous activity, punching bag, finger painting

Child is jealous

Causes: Treated unfairly or unfair comparison made to another child
New baby in family

Do Not: Shame him

Do:	Give warmth, love, and understanding Help him express his feelings

Child demands attention

Causes:	Is bored Feels left out, insecure, or unloved
Do Not:	Ridicule or shame Ignore or isolate Scold or punish
Do:	Show interest in him as a person Direct him to activities of interest to him Give him a fair share of attention

Child uses bad language

Causes:	Trying to get attention Imitating others Letting off steam
Do Not:	Get excited or show shock or embarrassment Make an issue of it
Do:	Calmly tell child to stop Suggest substitutes for the word Offer healthy outlet for his feelings

Child is destructive

Causes:	Feels jealous, bored, helpless Wants attention Desires excitement
Do Not:	Tell him he is bad or preach at him Scold, yell, or shout Punish, spank, or hit him
Do:	Remove things that are destructible from his reach Provide an adequate space for play and expect some wear and tear on equipment Substitute something else for what is being destroyed Provide things to pound, cut, and tear

Child won't share

Causes: Needs experience in owning and sharing
Too young

Do Not: Snatch things away from him
Scold him or tell him you do not like him

Do: Help him grow into sharing
Be sure he has things that are all his, so he learns what it means to own things
Be fair in settling children's arguments over things
Help him feel secure, love him

Child hurts other children

Causes: Is troubled or angry about something

Do Not: Punish or hurt him
Make him feel "bad"
Act angry

Do: Quietly separate the children
Divert his attention and take away the hurting object, calmly and firmly
Teach him there are some things we do not do
Help child to feel loved

Child does not tell the truth

Causes: Fear of punishment
Likes to exaggerate, imitate
Is seeking attention

Do Not: Punish or shame or reject
Make him apologize

Do: Give him attention for what he does and is
Provide him with opportunities for enriching his imagination
Help him discover the difference between fact and fancy
Tell him the truth

QUESTIONS:

1. One purpose of discipline is to help the child learn acceptable social behavior. What are four additional purposes of discipline?

According to Read, (The Nursery School), what principle of guiding the behavior of children has been broken in the following situations or comments described in questions 2-4?
What would you have said or done?

2. When Billy started throwing sand, the teacher said, "Don't throw sand!"

3. When three children started quarreling over a toy, the teacher shouted at them to stop.

4. The children are getting ready to go outside to play on a cold day. The teacher says, "Do you want to put your coat on?"

5. What is meant by "Redirection is the most effective when consistent with the child's motives or interests"?

6. The child care aide tells Billy it is time to go inside, but he continues playing. She should
   a. repeat her statement in a firm manner.
   b. reinforce her statement by adding another suggestion, such as "I'll help you put the toys away."
   c. take him by the hand and walk inside with him.

7. Analyze the child care center where you are employed. Where would be the most strategic positions for supervising the children during your duties at the center?

8. Why do children need to have limits set? What is the result when few or no limits are set?

9. Betty has a new baby brother at home. One day the child care aide saw her vigorously spanking a doll in the doll corner. She should
   a. explain to Betty that that is not the way to treat dolls.
   b. leave her alone.
   c. try to interest her in another game.
   Why did you select the answer you did?

10. What may be some of the reasons behind a child's feelings of resentment and hostility? (List three)

11. What could be said to a child who had hit another child that would be more helpful than the statement, "We don't hit children, we hit punching bags." What is missing in this statement?

12. What kind of environment and physical setting in the nursery school will help prevent feelings of hostility in the children?

13. Which of the following statements would you probably avoid when working with children? Why would you not make each of the comments you select?

_____ a. "Let's put your coat on before you go out to play."
_____ b. "Billy did it, I know you can too."
_____ c. "It's Jeff's turn to ride the tricycle now. You may ride it next."
_____ d. "You are a bad boy to hit Tommy. He won't like you anymore."
_____ e. "Shame on you for sucking your thumb. Big boys don't do that."
_____ f. "Thank you for helping me clean the table."

Match the characteristics in questions 14-17 with the type of discipline.

CHARACTERISTICS	TYPE OF DISCIPLINE
14. Child develops an inner control	1. Adult control
15. Child disregards others' rights	2. Democratic control
16. Child may become either submissive or rebellious	3. Child control
17. Child learns to work with others	

ASSIGNMENTS:

I. The following suggestions for setting limits help to support the child in his growth. (Review Read, The Nursery School, pp. 229-235.) During the next week watch for situations which are related to these suggestions. Describe what happened, the responses of the child, and your reaction.

a. Set only necessary limits.
b. Be sure the child understands the limits.
c. Be consistent without being inflexible or afraid.
d. Give the child time to accept the limits.
e. Accept the child's feelings when he "tests out" limits.

II. a. Record specific examples of the use of any of the various methods of guidance listed below.

1. Approval, either verbal or non-verbal
2. Explaining
3. Tolerating (ignoring)
4. Using physical means--leading by hand, force
5. Deprival of privilege
6. Examples of expected behavior
7. Expectation of cooperative spirit

b. How did you feel about each of these incidents? Did you agree with the action taken? Why or why not?

III. Here are some statements about children which are not complete. Each statement describes a particular kind of behavior problem. For example, the first statement says, "I think the child who never finishes eating on time should..." You are to finish the statements by describing what you think would be the best way of treating each particular problem.

How Do I Feel About Children?

1. I think the child who never finishes eating on time should...
2. I think the child who continually fights with other children should...
3. I think the child who bites his fingernails should...
4. I think the child who daydreams most of the time should...
5. I think the child who continually shows off in class should...
6. I think the child who relies on the teacher too much should...
7. I think the child who loses his temper when he does not get his own way should...
8. I think the child who is always unhappy and moody should...
9. I think the child who is timid and shy should...
10. I think the child who continually disobeys should...

Discuss your answers with your teacher.

UNIT IV-5

THE CHILD IN A CHILD CARE CENTER

SUBJECT: Hi Ho . . . Ho Hum

TASKS: Helps the children learn the established routines of the center

Helps the children become more independent in removing own garments, such as coats and sweaters

Assists children in developing good housekeeping habits

Assists children with routines, such as toileting, washing hands, and hanging towels after use

OBJECTIVE: Be able to suggest procedures to follow when helping children with routine tasks

REFERENCES: Green, Marjorie M. and Woods, Elizabeth L. A Nursery School Handbook for Teachers and Parents. Sierra Madre, California: Sierra Madre Community Nursery School Association, 1966. pp. 31; 42-43.

Read, Katherine H. The Nursery School: A Human Relationship Laboratory. Pennsylvania: W.B. Saunders Company, 1966. pp. 160-163.

CHILDREN AND WORK

In most child care centers, children participate in a variety of activities and routine tasks. There is educational value in involving children in these tasks. When a child is encouraged to put away toys or books, he develops a sense of order and a desire to preserve this order. As the child is given the opportunity to help with snacks or mealtime duties or to tie his own shoes or put on his coat, he will begin to develop a feeling of independence and initiative. Such tasks help a child to become self-disciplined.

It is important that children be supervised while they are carrying out routine tasks. The three-to-four-year-old should, however, be able to accomplish some things well enough so that no assistance will be needed. When the task is satisfactorily completed, the child care aide or adult should show approval by complimenting the act.

INDEPENDENCE THROUGH ROUTINES

The period of transition from having adults help him to doing things for himself is a frustrating period for a child. When the child's inward drive for independence meets the child care aide's desire to help him, some resistance may occur. The child often asserts himself and does not conform to being bossed or directed. He shows resistance through delay to perform a task or becomes stubborn and will not perform the task at all. This type of behavior is to be expected from a child who is beginning to want to be independent and to do things for himself. This is merely a test of his own abilities.

If the child care aide recognizes in the child this need for independence, she will find it easier to meet the resistance he offers and will be able to handle the difficulty without added strain. She will be pleased to know he is progressing toward independence; however, she also should know that it is her responsibility to see that he conforms to reasonable behavior. The child cannot be permitted to do just as he wants to do all of the time; this would result in complete chaos.

A child grows best if he is permitted to do what he wishes, but he must also have the experience of realizing that he does not lose the independence he has gained if he meets some of the demands of adults. It is important for the center staff to have clearly in mind what is expected of the child. If you, as the child care aide, have confidence in your actions you will make it easier for the child to accept your directions.

The following section includes some suggestions for helping children in routine situations.

Feeding: Food and eating habits are discussed in Unit V.

Housekeeping: In most nursery schools a locker is provided for each child to keep his coat, cap, or any other item which he brings to school with him. The locker should be marked with the child's name and perhaps with a picture, so the child will have no difficulty identifying his locker.

When the children arrive, they should be greeted and given a few minutes to relate incidents of interest, then guided verbally or physically to the locker to place their belongings. The child care aide may help teach the children the correct way to hang their coats and assist with other belongings when necessary. If the hooks and shelves are placed within the child's reach, he will soon be able to take care of his own belongings.

The child care aide may also guide the children in housekeeping duties during the day. This will help to keep the center neat and attractive. Shelves, drawers, or boxes clearly labeled, indicating what is to be kept there, will aid the children in returning materials to their proper places. This helps children to learn that when things are returned to their designated places they can expect to find them there when they are needed again. Keeping materials and equipment in order also reduces the possibility of frustration which occurs when children cannot find what they want.

The appearance of the center should be one of being "lived-in" without appearing cluttered. The child care aide may need to take time during the day to restore order when she finds equipment or materials too scattered. This can be done in such a way that it will not interfere with the child's play; it can be integrated into the play activity by subtle suggestions.

Children notice the appearance of a room. Attractive additions, such as fresh flowers, growing plants, an aquarium, a colorful mobile, a wall hanging, or an arrangement of geometric figures, will aid children in developing an appreciation for these items. Opportunities should be provided for them to help make decorative items for the center.

Paper towels, sponges, mops, or a broom should be available in the center to clean up unexpected spills. The child responsible for the spill should be encouraged to clean up his own spill. Some basic rules to teach preschool children are:

If you spill materials--pick them up.
If you spill water--wipe it up.
If you turn on a light--turn it off (when you leave the room).
If you open the door--close it.

Dressing: Learning to dress is a very exciting activity, especially for the two-to-three-year-old. Self-help garments which are easy to put on or take off encourage independence in dressing. The garment should have large buttons, large zippers, and front openings. Belts tied in the back are not good for play clothing.

The child should be allowed to dress himself unless it is evident that help is needed. Assistance should be given before the child becomes frustrated and discouraged. Watching a child dress is an experience requiring patience and restraint on the part of the aide. If the aide understands the importance of allowing the child to be independent, she will receive satisfaction from guiding the child to independent behavior.

Washing: Splashing in the water is a great sport for the two-year-old. His efforts remove little dirt, though, and he should be encouraged to use soap and warm water and to wash both sides of the hands. Assistance may be needed. The three-year-old does a better job of removing dirt, and the five-year-old can do a very businesslike job of washing his hands. Too high a standard of cleanliness should not be expected, and a child should never be scolded for getting dirty.

Toileting: REFERENCES: Green, Marjorie M. and Woods, Elizabeth L. A Nursery School Handbook for Teachers and Parents. Sierra Madre, California: Sierra Madre Community Nursery School Association, 1966. pp. 40-42.

Read, Katherine H. The Nursery School: A Human Relationship Laboratory. Philadelphia, Pennsylvania; W.B. Saunders Company, 1966. pp. 138-150.

The center should have regular times set aside for toileting. Some ways to help the child gain independence in toileting are:

Have confidence in the child's ability to learn
Try to put yourself in the child's place
Respect the child's body and sensitivity
Respect the child's individual adjustment to toilet training
Praise him for success, but be genuine
Encourage questions and conversations about training
Allow the child to get over fears. Let him experiment with the facilities and make friends with them before he uses them.
Avoid the use of words like "naughty," "dirty," "messy," and "bad"

Good bathroom habits should be encouraged at the center. Children should be taught to flush the toilet, wash their hands with soap and warm water, dry them with a paper towel, and then to place the towel in a waste basket.

As early as three years of age, sex roles are being learned. Sex-role identification, however, is at a minimum. Little boys and girls play together, fight with each other, share the same toilet facilities, and are seemingly unaware of the sex differences. Children do have a natural curiosity about their bodies, however, and if they ask questions about the differences in their bodies during the toileting routines, these should be dealt with honestly.

ATTENTION SPAN OF CHILDREN

The attention span of children is related to their participation in the routine tasks discussed in the previous section. Because the attention span of young children is very brief, they cannot be expected to remain at a particular activity very long. Children have a tendency to lose interest in projects and leave them unfinished.

Sex differences in relation to attention span can be observed. A three-year-old boy in a complex situation has an attention span of about eight and a half minutes. In a simpler situation, he has a span of about five and a half minutes. A three-year-old girl in a complex situation has an attention span of fourteen and a half minutes and a span of eleven and a half minutes in simpler situations. At five the child cannot be expected to sit still for a long time, but his attention span is increasing rapidly. He may remain interested in what he is doing up to 20 or 40 minutes. He may even carry a project over to the next day.

There are large amounts of individual differences among children and situations. Children differ in different situations at different times. As the child grows older, however, his attention span increases.

QUESTIONS:

1. Kay, a three-year-old, played with a doll for about ten minutes and went into the housekeeping area and played there about fifteen minutes. The child care aide is concerned that Kay changes activities too often. What would you tell her?

2. When four-year-old Charles arrived at the center, the child care aide unzipped his coat, helped him take it off, and then hung his coat in his locker. Do you agree with what she did? What would you have done? Why?

3. Jimmy accidentally spilled some water while he was playing; the child care aide should
   a. encourage him to wipe it up.
   b. quietly wipe it up herself.
   c. tell Jimmy he cannot play with water for the rest of the week.

4. What can be done to help children return play equipment to the proper place?

5. If a child has been toilet trained at too early an age, what effect may this have on his behavior?

6. What types of behavior in relation to toileting might be expected during the first weeks of nursery school? How should this behavior be handled?

7. You, as a child care aide, find three-year-old Betty watching Bobby in the bathroom. What should you do?

ASSIGNMENTS:

I. Observe two or three Children as they put on and take off garments.
   a. Did they take off their sweaters or coats by themselves and put them away or did they need help?
   b. To what extent was their ability to help themselves related to the style of their coat, shoes, etc?
   c. Were the children influenced by the activities of the other children at the center?
   d. If you were responsible for this activity, how much help did you give the children? Give reasons for your actions.

II. Observe two or three children as they go to the bathroom.
   a. Did they go directly to the toilet when they entered the room?
   b. Did they need help from an adult? If so, what kind of help was given?

c. Did they flush the toilet?
d. Were they affected by the presence of other children or adults? In what way?
e. What comments did they make?
f. Did they wash their hands after using the toilet?

UNIT IV-6

THE CHILD IN A CHILD CARE CENTER

SUBJECT: Time for a Break

TASKS: Assists in arranging mats on floor for children's rest period

Supervises rest period of children

Stacks or stores mats after children's rest period

OBJECTIVES: Be able to (1) list signs of fatigue
(2) describe procedure for rest period

REFERENCES: Green, Marjorie M. and Elizabeth L. Woods. A Nursery School Handbook for Parents and Teachers. Sierra Madre, California: Sierra Madre Community Nursery School Association, 1966. pp. 35-39.

Read, Katherine. The Nursery School, A Human Relationship Laboratory. Philadelphia, Pennsylvania: W.B. Saunders Company, 1966. pp. 159-160.

Sleep and rest are necessary for continuous growth and good health in young children. Small children need a morning rest period and a nap in the afternoon.

The attitude of the teacher toward the rest period will influence the way the children react to it. It is important that you, as the child care aide, understand the importance of the rest period and how to supervise this activity.

QUESTIONS:

1. List at least four signs of fatigue in children.
2. What are three things you do to help prevent fatigue in the children for whom you are responsible?
3. What are five things that should be done to prepare the room for the rest period before the children come into the room?

UNIT V-1

CHILDREN'S FOOD AND EATING HABITS

SUBJECT: Are You Ready to Eat?

TASK: Helps the children prepare for mealtime

OBJECTIVE: Be able to suggest suitable procedure to follow prior to mealtime to prepare children for noon meal

Setting the stage for mealtime is an important step in providing for a successful meal. How the child feels when he comes to the table affects both his attitude toward eating and his appetite. What conclusions would you draw from the following example about the effects of different kinds of play on a child's appetite?

> Mike and Johnny, age 3, started to chase each other and spent about 30 minutes in active play before time for lunch. Meanwhile, Billy and Joe played quietly in the sandbox and built a castle. The children were then called to lunch. Mike and Johnny slumped in their chairs and played with their food instead of eating much of it. Billy and Joe, on the other hand, seemed to have good appetites and cleaned their plates.

An important "before mealtime" habit for children to form is that of carefully washing their hands. One of the ways children form such habits is by imitation. They will be more likely to wash their hands if they see an adult set the example.

The routine before mealtime should allow enough time for all children and teachers to wash their hands. Help the children learn to use warm (but not hot) water and soap. Check to be sure enough soap is available for everyone. If children develop the habit of washing their hands before eating, there will be less likelihood that colds and other communicable diseases will be spread. Help children realize that clean hands and eating are partners.

QUESTIONS:

1. a. In what kind of play were Mike and Johnny involved before lunch?
   b. What effect did this seem to have on their appetites?

2. a. In what kind of play were Billy and Joe engaged before lunch?
   b. How did this effect their appetites?

3. What relationship does this indicate between types of play just before mealtime and children's appetites?

4. Suggest three appropriate types of play for children before mealtime.

5. Give two reasons why it is important that you, as well as the children, wash hands before mealtime.

UNIT V-2

CHILDREN'S FOOD AND EATING HABITS

SUBJECT: Where's My Place?

TASK: Sets table for noon meal

OBJECTIVES: Be able to (1) recognize when the table is set correctly for a particular meal
(2) plan a centerpiece which children could help make

Many different factors influence the enjoyment of a meal. In order to help a child enjoy his meal, the table should be set in an attractive manner. Brightly colored dishes, neatly arranged on the table with flowers or an attractive, appropriate centerpiece help make mealtime a pleasant experience. The table may have a "wipeable" cloth or place mats at each place. The silverware should be straight, and only the amount necessary for the meal should be used. An array of unnecessary silverware is confusing to a child.

Suppose the following meal were being served at the child care center:

FISH STICKS

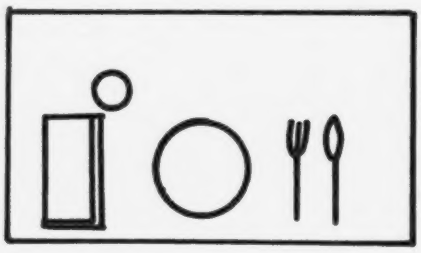
FRENCH CUT GREEN BEANS

WALDORF SALAD TOAST TRIANGLES

ANGEL CAKE

MILK

If the table were set like this, what rules of table setting were broken? Draw the place setting as you think it should be.



Did you move the glass to the upper right of the plate instead of placing it on the left? Remember, all beverages are placed on the right. Did you move the fork to the left of the plate? If a knife were necessary, it would go to the right of the plate with the blade turned toward the plate. The spoon goes to the right of the knife.

Exceptions to these rules are sometimes made for the convenience and comfort of left-handed children. For example, beverages may be placed on the left instead of the right so the child will not have to reach across his plate to pick up his cup or glass.

How would you set the table for this meal? What silverware, if any, would children use to eat each of these foods. Draw a sketch to show how you would set the table for this meal. (Remember, some foods are finger foods.)

Beef stew (served in a bowl)
Celery sticks
Bran muffin
Seedless grapes
Milk

What silverware did you include in your sketch? If you decided a spoon was all that was necessary, you are right. The glass of milk would be placed above the spoon and the napkin to the left of the plate.

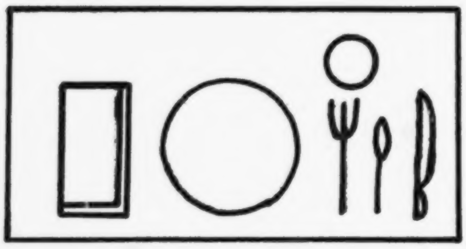
Giving children an opportunity to help prepare the table by making place cards, simple centerpieces, or table decorations for special occasions may increase their interest in the mealtime situation. The important thing is not the quality of the table decoration, but that the children have the opportunity for creative expression. Children like to feel that they can help, and this is one contribution they can make to their mealtime environment.

The decorations should be colorful and within the capabilities of the children. Why would having three-year-olds carefully copy their names on place cards not be a suitable activity? Obviously, this in not within the capabilities of this age child and does not give him an opportunity for creative expression.

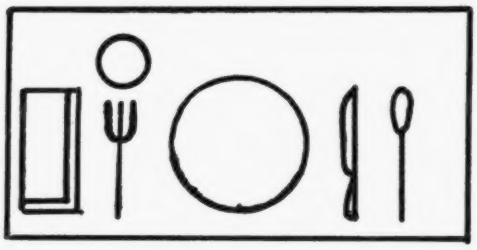
QUESTIONS:

1. Tell what should be changed in each of the following table settings:

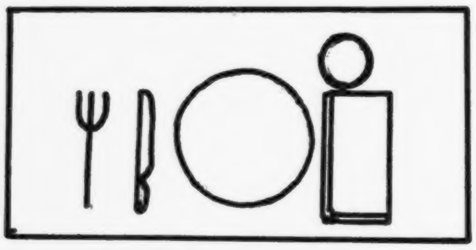
A.



B.



C.



2. Check the statements that may add to a child's enjoyment of eating:

_____ a. An attractive looking table
_____ b. Lots of silver
_____ c. Brightly colored dishes
_____ d. Expensive linens
_____ e. A neatly set table
_____ f. Food that looks good

ASSIGNMENT:

Plan a table decoration (centerpiece or place cards) the children can make in the center where you work.

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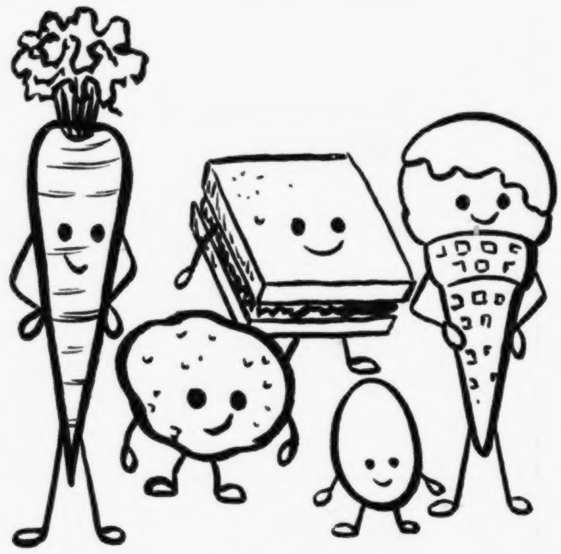
UNIT V-3

CHILDREN'S FOOD AND EATING HABITS



SUBJECT: You Are What You Eat

TASK: Helps the children understand the importance of eating nourishing food

OBJECTIVE: Be able to identify the nutritional needs of children

REFERENCE: McEnery, E.T. and Suydam, Margaret Jane. Feeding Little Folks. Chicago, Illinois: National Dairy Council, 1967. pp. 8-17.

Children like to eat, and it is important that they eat nourishing foods. A child's nutritional needs are greater in proportion to his size than those of an adult. He grows faster and needs more food for his size during the first two or three years of his life than he will at any other age. This does not mean, however, that a child needs more food than adults. This mistaken idea has led many adults to be overly concerned about the amount of food children eat. The amount is not as important as the kinds of food he eats.

Until a child is 10 to 12 years old, he will need smaller amounts of protein, most of the vitamins, and iron than adults. Remember, however, that these amounts are larger in proportion to his size than for adults. The only nutrients for which the requirements are larger than for adults are minerals, calcium, phosphorus, and Vitamin D.

During their preschool years, children need foods that will
1. build new tissues, muscles, bones and teeth.
2. provide energy.
3. repair old tissues.
4. keep their bodies in good running order.

The same Basic Four Food Guide which you use to check your eating habits can be used as a guide for evaluating children's eating habits. Children's diets should include foods from each of these four groups.

The following chart summarizes the food groups, daily amounts, and average size servings needed by children.

FOOD GROUP	DAILY AMOUNTS	AVERAGE SIZE SERVING
I. MILK AND MILK PRODUCTS		
Milk	2-3 cups	1/2-1 cup
Cheese and Ice Cream	Use occasionally in addition to milk	
II. MEAT, FISH AND POULTRY	2-4 T.	2-4 T.
Eggs	1 per day	1
III. FRUITS AND VEGETABLES		
1 Vit. C fruit or vegetable	1/3-2/3 cup	1/3-2/3 cup
At least 1 green or yellow vegetable	2-4 T. (1 serving)	2-4 T.
Other vegetables	4-8 T. (2 servings)	2-4 T.
Other fruits	1/4-1/2 cup	1/4-1/2 cup
IV. BREADS AND CEREALS	4 servings	1/4-1/2 cup cereal 1/2 slice bread
V. OTHERS		
Butter	As spread on bread and to season vegetables	
Vitamin D	400 Units (1 qt. milk contains 400 Units)	

The chart on page A-97 shows the nutrients which are contained in the foods in each of Basic Four Food Groups.

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COMPOSITE SHORT FORM FOR DIETARY CALCULATION

BASIC FOOD GROUPS	AMOUNT	FOOD ENERGY	PROTEIN	CALCIUM	IRON	VITAMIN A VALUE	B$_1$ THIAMINE	B$_2$ RIBOFLAVIN	NIACIN	C ASCORBI ACID
		Cal.	Gm.	Mg.	Mg.	I.U.	Mg.	Mg.	Mg.	Mg.
I. Milk, cheese, ice cream:										
Milk equivalent......	1 cup	165	8	257	.2	435	.07	.35	.2	0
II. Meat, fish, poultry, eggs, dry beans and peas, nuts:										
Meat equivalent......	1 ounce	101	7	12	1.2	232	.08	.10	1.5	0
III. Vegetables and fruits:										
Dark green and deep yellow vegetables.........	¼ cup	25	1	23	.6	2,590	.04	.04	.3	13
Citrus fruits......	½ cup	55	1	27	.4	140	.08	.03	.3	53
Other vegetables...	½ cup	80	2	22	.8	80	.07	.05	.9	13
Other fruits.......	½ cup	80	1	16	.7	560	.04	.05	.4	7
IV. Bread and cereals:										
Whole grain, enriched, restored.	1 serving	73	2	14	.5	8	.08	.04	.6	0
Sugar, Candy.............	1 T.	55	0	0	0	0	0	0	0	0
Fat, Oil.................	1 T.	100	0	0	0	0	0	0	0	0

What Difference Does It Make?

A normal diet is one which supplies all nutrients essential for health, growth, and development. The amount of food a child eats varies with age, sex, body build, physical activity, and state of health. For the most part, children seem to eat the amounts of food that are necessary for their energy requirements. The adequacy of a child's food intake is, however, determined by the foods included in the child's diet. Each nutrient must be provided in sufficient amounts and in reasonable relationship to one another to make the diet both adequate and balanced. A well nourished child who is getting all the essential nutrients should make steady and consistent gains in growth. On the other hand, if there is a deficiency of any of the essential nutrients, the child is bound to suffer.

Protein is the mainstream of life; without protein, there is no life. A child's protein needs depend upon his requirement for tissue repair and general maintenance as well as his rate of growth. Proteins are broken down into twenty-three amino acids during the digestive process. These amino acids create body cells, tissues, organs, secretions, and fluids. A deficiency of protein causes the rate of growth to decrease, muscles to become flabby, and results in anemia.

Minerals aid the body in maintaining a constant osmotic pressure, supply the necessary balance of ions for the normal functioning of the cells, and aid in digestion. Calcium is one of the most important minerals because it aids in the development of teeth and bones. The more rapidly a child grows, the more calcium he will need. A lack of calcium causes the mineralization of the bones to proceed at a slower rate, and it causes irritability in the nervous system.

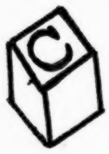
Phosphorus aids in the development of the bones and teeth. It also plays a part in the oxidation of carbohydrates. The maintenance of a proper balance between acid and alkali in the blood is also due to phosphorus.

The primary purpose of iron in the body is to form hemoglobin.

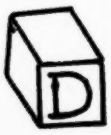
Iodine regulates the supply of thyroxine which is produced in the thyroid gland. Thyroxine helps the body to utilize food. A deficiency of iodine causes goiter.

Vitamins are necessary for normal growth and development, maintenance of health, regulation of body processes, and protection against nutritional diseases. The most important function of vitamin A is to maintain healthy mucous membranes throughout the body and to guard against bacterial invasion. Other functions of vitamin A include improved (1) mental development, (2) formation of bones and teeth, (3) eyesight, (4) muscular development, and (5) skin structure. A deficiency of vitamin A leads to dryness of the skin, lowered resistance to disease, and damage to associated organs.

Vitamin B provides for healthy nerves, protects against fatigue, regulates circulation of the blood, and helps to maintain a healthy appetite. A deficiency of vitamin B disturbs the functioning of the endocrine glands and carbohydrate metabolism, thus retarding growth of the child.



Vitamin C is found in all the cells and tissues of the body, especially the brain, liver, spleen, and kidneys. It regulates growth, digestion and appetite, keeps nerves healthy, and prevents scurvy. It also helps to prevent body bruises.



Vitamin D regulates the use of calcium and phosphorus in the development of bones and teeth. It also makes calcium salts more soluble, and increases the amount which is absorbed and deposited in the skeletal system. Insufficient amounts of vitamin D may result in rickets.

The water requirement for a child is three times that for an adult in proportion to size because the child has a more active body metabolism. Water aids in digestion, urination, circulation, and removal of excess heat from the body.

Bulk foods or roughage aid the muscles of the large intestine in throwing off waste, and they aid in better absorption of digested foods.

Carbohydrates, which make up 2/3 of a child's caloric intake, prevent physical exhaustion and provide heat and energy for the body.

Fat carries the fat soluble vitamins necessary for health and growth to all body tissues. It also is a good source of heat and energy in the body. A thin layer of body fat protects the skin, muscles, and nerves. Fats also aid in the absorption of calcium into the body. Because fat leaves the stomach more slowly than other foods, a child feels hungry after a shorter period of time following a meal with little fat than one with a liberal supply of fat.

QUESTIONS:

1. What are the Basic Four Food Groups needed in a child's diet?
2. Thelma enjoys playing games and climbing on the jungle gym; however, she does not have the energy to keep pace with her friends. Refer to the chart on page A-97. What are some foods which are high in food energy? Plan a day's menu containing these foods.
3. Jane, the child care aide, noticed that Susie, age 3, ate about 2 T. of hamburger and about 3 T. of green peas. She drank a glass of milk, ate a carrot stick, and a half slice of bread. Jane told the director she didn't think Susie ate enough and wondered what she should do. What do you suppose the director told her?

4. Examine menus A and B. Write the name of the Basic Four Food Groups in which each of these foods belong. (Some of these foods may contribute little to any food group. If so, write "none" on your answer sheet.)

Menu A

a. Hamburger Patty ______________________________
b. Green Beans ________________________________
c. Whole Wheat Bread ___________________________
d. Fruit Cup _________________________________
e. Milk _____________________________________

Menu B

a. Hot Dog ___________________________________
on
b. Bun ______________________________________
c. Potato Chips _______________________________
d. Pickles ___________________________________
e. Coke ______________________________________

5. Which of the above menus would contribute the most to the child's daily nutritional needs?

6. If children refused to eat the following foods, what nutrient(s) would be missing in their diets? (Refer to the chart on page A-97, and list only the main nutrient(s) that would be affected.)
   a. Eggs
   b. Milk
   c. Carrots
   d. Orange juice
   e. Broccoli

7. After you have identified the missing nutrients for question 6, select the statement(s) below which describe(s) the effect a lack of the nutrients in these foods may have on the body.

FOODS	EFFECTS
_____ a. Eggs	1. Lowered resistance to disease and dry skin
_____ b. Milk	2. Lack of hemoglobin
_____ c. Carrots	3. Tired, poor appetite, nervous
_____ d. Orange juice	4. Bruises easily, scurvy
_____ e. Broccoli	5. Bones develop at slower rate

ASSIGNMENT:

Plan a bulletin board or display which shows foods high in nutritive value and their effect on the body.

UNIT V-4

CHILDREN'S FOOD AND EATING HABITS

SUBJECT: Talk, Talk...When Do We Eat?

TASK: Helps the children to develop good food habits and table manners

OBJECTIVES: Be able to (1) describe acceptable eating habits for young children
(2) suggest ways to guide children toward more independent eating practices
(3) relate the effect of children's emotions on their eating habits

REFERENCES: McEnery, E.T. and Margaret Jane Suydam. Feeding Little Folks. Chicago, Illinois: National Dairy Council, 1967. pp. 18-21.

Read, Katherine. The Nursery School, A Human Relationship Laboratory. Philadelphia, Pennsylvania: W.B. Saunders Company, 1966. pp. 152-158.

What are acceptable eating habits for small children? How particular should adults be about the way children eat? How often have you heard an adult say, "Watch out, you will spill your milk!"; "Don't use your fingers, use your fork," or "Oh, no, now you dropped it on the floor!"?

Let's take a look at preschoolers and see what we might expect of them in regard to eating habits. By this time they can begin to feed themselves fairly efficiently and can use a spoon and a fork, although they will continue to use their fingers occasionally. They like to pour liquids and can do so if the pitcher and glasses are child-size.

Some children will need more help and guidance than others because of differences in their motor abilities. Just as some children can tie their shoe laces or button their coats earlier than others, some learn to get food on a spoon and into their mouth before others can. The child's rate of growth cannot be hurried. The only thing that can be done is to encourage all of his attempts to feed himself.

For some children, eating may be a tiring procedure. They may make a good start but then slow down as their appetite decreases. If a child appears to be tired, it may be a good idea to help him by filling the spoon for him or by scraping the food together so he can get it on his spoon. The amount of help children will need varies from child to child and from day to day. When children are tired or do not feel well or are emotionally upset, they may need the comfort of some help in feeding. This occasional kind of help will not slow down their development toward more independent eating practices. If they continue to want help, however, you may need to discuss this with the director.

It has been found that children can sense adults' feelings about their abilities. When you sit with children during mealtime, try to be accepting of awkward efforts. The important thing to try to do is to provide an atmosphere in which children feel comfortable and capable of handling mealtime procedures. As they develop a feeling of confidence in themselves, they will begin to improve their eating habits.

The best way to help young children learn table etiquette is to set a good example and to be patient with their efforts. When one stops to think about all that children must learn just to master the mechanics of eating, one is more understanding about their awkward movements and accidents. For example, when one thinks about the coordination necessary to make hand-to-mouth movements and eye-hand movements, it is easier to understand why children appear to be messy eaters. Try to consider the child's eating habits from his point of view and with his growth and experience in mind.

The time to begin to teach some basic table manners is when children have reached the point in their growth process where they can handle forks, knives, and spoons without difficulty. As we try to answer the question, "What is the purpose of good manners?", our guide might be that the purpose of manners is to make the child more acceptable to others. Thus, the child can be told, "We eat meat with our fork" or "We swallow food before talking" or "We drink our milk quietly." If adults are kind and patient when making these statements, chilren will be likely to follow them. Children like to know what is expected of them, but what is expected should be in line with what they are able to do.

QUESTIONS:

1. What is the most important goal for the mealtime situation for children?
2. Should children be discouraged from touching and feeling their food? Why?
3. When should the teaching of good manners begin?
4. What is the best way to help children learn table manners?
5. What is likely to happen if too much is expected of children in terms of rules of etiquette?
6. Why are children messy eaters?

7. Jane Smith is 3-1/2 years old, and her mother is concerned with her eating habits. Jane still has trouble using a fork, and it takes her so long to eat that her mother often puts the food on her fork and sometimes even feeds her. This also prevents the spilled foods on the floor that occur when Jane tries to feed herself. Even though Mrs. Smith has told her over and over not to play with her food, Jane still occasionally uses her fingers when eating and seems to like to touch new foods. What advice would you give Mrs. Smith?

8. Judy spilled her milk at the table at the child care center. How should the child care aide react?

9. When do children's attitudes toward eating begin?

10. Why is the situation so highly charged with feeling?

11. Suppose a child's need for love had not been met in infancy. Would you expect this to influence his attitude toward mealtime? Why?

12. Ordinarily, Jill eats well but today she seems to have no appetite. During the morning she quarreled over the use of the tricycle and became quite upset about this. Betty, the child care aide, insisted that she eat because she thought Jill would feel better is she ate a big meal. Do you agree with Betty's way of handling this situation? Why?

13. Why are small servings recommended for children?

14. If you were to observe a group of four-year-olds at mealtime, would you expect all of them to eat approximately the same amount of food? Why or why not?

15. Would you expect a child to be consistent in the amount and kinds of food he eats?

16. What are some guidelines for handling conversation of young children during mealtime?
    a.
    b.

17. What are three things you can do to help make mealtime pleasant for children?
    a.
    b.
    c.

ASSIGNMENT:

I. Observe the children with whom you work at mealtime and give examples of their eating behavior.
   a. What things do they do well?
   b. What skills are they still learning?
   c. What kinds of help do they need?
   d. What table manners do you think they are ready to learn?

II. Recall some incident where a child's appetite was influenced by his feelings. Explain.

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Lubbock, Texas

UNIT V-5

CHILDREN'S FOOD AND EATING HABITS

SUBJECT: Hey, What's For Lunch?

TASK: Helps the children to develop positive, acceptable attitudes toward food and eating

OBJECTIVES: Be able to (1) suggest ways to make mealtime a pleasant occasion
(2) recognize reasons children may refuse to eat
(3) suggest ways to introduce new foods to children

MEALTIME FOR LITTLE FOLKS

Hi Teach!

This is Sally. I am three years old now. I like to talk on the telephone. I'm phoning to tell you how I like to eat.

I like pretty colored foods.

I like foods I can hold--rolled lettuce, pieces of carrot, and slices of apple (peeled, please).

I like my meat cut up in little pieces.

I do not like things that bite my tongue. (My taste is keener than yours.)

It is fun to eat foods that go "crunch."

I like food warm--not real hot or real cold.

I like a little bit on my plate at one time. Then I can ask for more.

I like to feed myself. When I get tired, it is nice if somebody helps me.

I do not like vegetables with strings in them.

I do not like gummy things. They stick in my mouth. Sometimes mashed potatoes do.

A whole glass of milk almost fills my tummy. Then there is not much room left. I would rather leave the milk till last.

I like my own plate. I can push my spoon against the high sides. This way, I do not spill so much.

I can eat best with my own spoon. I like the short handle. Yours is too big and deep.

I like my own fork, too. It fits my mouth and is not sharp.

I like to push my feet flat on the floor or on the step of my high chair.

I like to pour my milk myself. Let me use a little pitcher. It has a wide mouth.

I like to drink from my own cup. I can put my whole hand through the handle.

Sometimes, a little, small-topped glass makes it easier not to spill.

I can pick up those little, round, green peas with my fingers. They run away from the spoon. They are good when you mash them.

* This material was prepared by Ruth E. Harris, Family Life Specialist at Florida State University.

Introducing New Foods

REFERENCE: Read, Katherine. The Nursery School, A Human Relationship Laboratory. Philadelphia, Pennsylvania: W.B. Saunders Company, 1966. Review pp. 153-156.

Childhood is a good time to introduce a wide variety of foods because children are naturally curious and enjoy new experiences. The more foods a person likes, the more likely it is that his nutritional needs will be met.

New foods should be introduced in small amounts and one at a time. The average size serving for a child is 1 tablespoon of food for each year of age. An appropriate serving for a three-year-old, therefore, would be 3 tablespoons. One or two tablespoons of a new food would probably be sufficient. It is also recommended that new foods be served with familiar foods children like.

Encourage children in a subtle manner to try new foods. It is not a good idea to make an issue of it or call undue attention to the new food. It is usually desirable, however, to encourage the child to at least try it. If the child is ignoring the food, you might say, "Jane, isn't this tomato a pretty color? Let's see what it tastes like." A relaxed, friendly manner will help the child to feel at ease about trying the new food and such a comment may arouse his curiosity enough that he will try it. If he still ignores it, drop the matter and try introducing the food at another time. It may take two or three tries before the child accepts the food. Good nutrition habits take time to form, so patience over a period of time is necessary.

The role of the nursery school worker is an important one. One reason children may refuse to eat certain foods is that they see adults refuse to eat them. Children are great imitators and if they see adults enjoy and eat the food served, they will be likely to follow their example.

Are you prepared to help children develop good food habits? Can you honestly answer each of the following questions with a "yes?"

1. Do I like a wide variety of foods?
2. Am I willing to try new foods?
3. Can I eat foods I do not like without letting the children know how I feel?
4. Do I believe it is important that children learn to eat a wide variety of foods?
5. Can I provide the kind of atmosphere during mealtime in which children feel encouraged to try new foods?

There are a variety of reasons why children may refuse to eat or lose their appetites. Some of the reasons are shown in the chart below.

EATING PROBLEMS	CAUSES
Negative attitude toward certain food	Child may have been forced to eat this food Child may have seen adult refuse to eat it
Resistance to eating	Child may have been forced to eat when not hungry, tired, or sick Too much may have been expected of child in terms of table manners, length of time it takes to eat

EATING PROBLEMS	CAUSES
Slow eating	Child may be overstimulated Portions may have been too large
Non-hunger	Child may have been given too much attention by constantly talking about food and how much he is eating
Displeasure in eating	Same foods and same method of preparation may have been used day after day

Methods of improving eating habits:

Serve meals at regular times.
Do not strain or hurry mealtime.
Make mealtime a happy event.
Give child a variety in his diet.
Make sure he gets plenty of exercise and rest.
Do not force him to eat.
Make meals nutritious, but not too rich in sugar and fats.
Prepare food in an attractive manner.
Display good attitudes and carry on pleasant conversation at the dinner table.

QUESTIONS:

1. What would you do if a child spit out a new food he was served?

2. What may happen if too many new foods are introduced in a short period of time?

3. Should a child be required to take at least one bit of a new food? Why or why not?

4. When children feel _______ and _______, they will be more likely to accept new foods.

5. How does the way an adult reacts to a food influence a child's reactions?

6. What could you say to a child who was ignoring the green pepper strips which were being served for the first time?

7. Patricia consistently refuses to eat vegetables at the center. With your knowledge of nutrition, you know that this is not good for the child. What suggestions could be made to her mother to get her to cooperate with the center in encouraging Patricia to eat vegetables?

8. What mistake is being made in each of the following situations? How will this probably affect the child's eating habits?

   a. Nursery school teacher says, "I don't want any carrots."
   b. Child using fingers--teacher says, "Johnny don't do that--use your fork."
   c. Child not eating--adult asys, "Please Bobby, eat your meat. It will make strong muscles. Oh, dear, you haven't finished your milk either."
   d. Child with large servings of food on his plate.

ASSIGNMENT:

Recall the children in the child care center where you are employed and answer the following questions:

What factors in the child care center environment encourage good eating habits?
How do the adults contribute to making lunch time an acceptable social experience for the children? Give examples.
How do the children participate in the procedure of serving?
Of what value is the child's participation in the lunch procedures?

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Lubbock, Texas

UNIT V-6

CHILDREN'S FOOD AND EATING HABITS

SUBJECT: Bet You Can't Eat Just One

TASK: Prepares and serves mid-morning and mid-afternoon snacks

OBJECTIVES: Be able to (1) list purposes of snacks for preschool children
(2) suggest typical and appropriate snack foods enjoyed by children
(3) suggest ways to encourage children to eat snacks
(4) prepare a checklist of sanitary procedures to follow when preparing snacks

Snacks help provide children with the energy they need to avoid the late morning or afternoon slump. In an earlier lesson, it was mentioned that children who are too tired or too hungry often eat poorly at mealtime. It is suggested that snacks include foods from the Basic Four Food Groups studied earlier. Even though a child's nutritional needs are high in proportion to his size and caloric needs, there is a limit to how much he can eat. It is not a good idea to let the child fill up on foods that do not contain the nutrients he needs for growth and energy. Surveys of diets of preschool children show that children in this age group often lack sufficient amounts of vitamin C. Snacks of orange juice, grapefruit juice, lemonade, tomato juice, or other fruit juices which have had vitamin C added, would help to meet this need.

Snacks from other groups in the Basic Four might be milk, crackers, and cheese, or peanut butter and toast sticks. Raw vegetables and fruits such as carrot or celery sticks, green pepper strips, radishes, sliced oranges, apple wedges, or grapes are high in nutrients, but they would not spoil the child's appetite for the noon or evening meal.

At both snack and mealtime children enjoy colorful, attractively arranged foods. Children like food which is simply prepared and easy to eat. They prefer food at medium, rather than very hot or very cold temperatures. Children often want to know what they are eating and may pull a sandwich apart or separate ingredients in a casserole. Generally, children prefer foods served individually rather than in combination dishes. Arranging foods in the form of a toy or animal appeals to children. Putting faces on open-face sandwiches is one way to arouse their interest in eating.

Colorful plates, cups, straws, and napkins help to make eating a pleasant occasion. As in any situation where children are being fed, the attitude of the adult toward the food influences the way the child will react.

Snacks should be served at a regular time each day. The time at which they are served will depend upon when the children arrive at the center and when the noon meal is to be served.

Sanitary procedures need to be followed during the preparation of the snack. Some key points to remember are:

Wash hands before preparing food and after handling soiled dishes.
Hold glasses at the bottom, not near the rim.
Pick up silverware by the handles, not the end which holds the food.
Do not prepare food if you have a cut or infection on your hands.
Cover your mouth when coughing.
Never put a utensil back into the food which has been used to sample the food.
Wash fresh fruits and vegetables before giving them to the children.

QUESTIONS:

1. Why do children need mid-morning snacks?

2. Which of the following foods would you suggest be served as a snack?
    a. Orange juice
    b. Carrot sticks
    c. Sandwiches
    d. Pickles
    e. Milk
    f. Candy
    g. Apple wedges
    h. Cookies

    What did you use as a guide for making your selections?

ASSIGNMENT:

Make a checklist of sanitary practices to follow when preparing food for children. If you have this responsibility, use the checklist each time you work in the kitchen.
Example: Do I handle glasses near the bottom? YES NO
1.
2.
3.
4.
5.

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UNIT VI

CHILDREN'S PLAY: A LEARNING EXPERIENCE

SUBJECT: Play with a Purpose

TASK: Assume some responsibility, under supervision, for play and learning experiences of children

OBJECTIVES: Be able to (1) explain how children learn and develop through play
(2) describe the stages of development in play
(3) recognize purposes of different types of play
(4) suggest ways to direct play activities of children

REFERENCE: Leeper, Sarah Lou. Good Schools for Young Children. New York: The Macmillan Company, 1967. pp. 311-316.

VALUE OF PLAY

Play occupies most of the waking hours of children and serves many purposes. Children learn to adapt to their environment through play. They convert the experiences of the world into play, pretending they are performing the activities in real life. Playful repetition of actual events helps children to feel comfortable in their environment. It must be remembered, however, that children imitate things as they see them with little concern for accuracy.

TYPES OF PLAY AND PLAY ACTIVITIES

Free Spontaneous Play

There are no rules and regulations associated with this type of play. It is often solitary play. The length of time for the activity is determined by the child. This type of play is often exploratory in nature.

Outdoor Play

REFERENCE: Todd, Vivian and H. Heffernan. The Years Before School. New York: The Macmillan Company, 1965. pp. 234-242.

- Children should play outdoors as much as possible.
- Equipment for outdoor play should include things which exercise the

muscles and things which stimulate mental activity.

- * Children living away from a natural environment of trees and lawns should be provided with such things as ladders, ropes, climbing bars, and sandboxes.

Indoor Play

REFERENCES: Leeper, Sarah Lou. Good Schools for Young Children. New York: The Macmillan Company, 1967. pp. 323-331.

Todd, Vivian and H. Heffernan. The Years Before School. New York: The Macmillan Company, 1965. pp. 242-245.

- * Some freedom of environment when playing indoors is necessary.
- * Some degree of unorderliness is to be expected during playtime.
- * Children are likely to become irritable if they constantly hear "don't"
- * A punching bag furnishes an outlet for energy which otherwise may become behavior annoying to others.

Dramatic Play

REFERENCE: Read, Katherine. The Nursery School, A Human Relationship Laboratory. Philadelphia, Pennsylvania: W.B. Saunders Company, 1966. pp. 279-295.

- * Dramatic play is an individual expression of the child's inner needs, strivings, and concepts.
- * The child acts out the nursery rhymes he used to simply say; he plays doctor, milkman--all his representations of the life about him. The child does not need a lot of toys, but he should not have a lack of space or a lack of imagination in the adults around him.
- * In dramatic play, each child uses words, gestures, and actions that have a significance peculiar to him alone. He makes playthings, activities, and people mean what he personally thinks and feels them to be.
- * In dramatic play specifically, the medium of expression is the role the child chooses to perform or the theme he acts out. This behavior may reflect his responses to the group.
- * An analysis of a child's dramatic acting can reveal a great deal about the relationships, people, needs, and impulses that preoccupy him. This aspect of play is important in giving clues to the child's social growth.

Art Activities (Finger Painting, Painting, Clay)

REFERENCE: (Required) Read, Katherine. The Nursery School, A Human Relationship Laboratory. Philadelphia, Pennsylvania: W.B. Saunders Company, 1966. pp. 310-318.

Todd, Vivian and H. Heffernan. The Years Before School. New York: The Macmillan Company, 1965. pp. 441-464.

(Supplementary) Hoover, F. Louis. Art Activities for the Very Young. Worcester, Massachusetts: Davis Publications, Inc., 1966. (The entire book contains suggestions for art activities)

Osborn, D. Keith, and Houpt, Dorothy. Creative Activities for Young Children. Detroit, Michigan: The Merrill-Palmer Institute, 1964.

- * Finger painting encourages creative expression through direct contact between creator and product. When fingerpaints are presented without limitations, they offer the child a new world to explore and a unique opportunity not only for self-expression, but also for self-discovery.

HOW TO DESTROY THE VALUE OF PLAY

Purpose and Timing:

- * Sometimes we destroy the value of play through our very eagerness to provide children with creative media and opportunities to express themselves. The timing may be wrong.
- * Materials can be discouraging rather than stimulating if the child is not ready to use them effectively.

Self-Conscious Play:

- * Play which is made self-conscious ceases to have the real value of play. Grownups sometimes blunder by entering too actively or even too enthusiastically into children's spontaneous play by making suggestions, laughing at the wrong moments at something that seems "cute" but is serious to the child, or giving criticism that downgrades what the children have worked out by themselves.

Too Many Toys:

- * Children are easily overwhelmed by too many toys. Some playrooms look like a toy store thrown into confusion.

- * The only-take-one-thing-at-a-time rule can also stifle the value of play. A child should be free to use play materials or toys constructively, even if it is not labeled "the right way."

Toys for Boys or Girls:

- * Perhaps one of the most frequent and unrecognized ways of destroying creative play is the stereotype of the kind of play which is suitable for boys and girls. Children who have a clear masculine or feminine identification with father, mother, or other adults whom they admire and copy, can be left safely to choose their own play interests.

Competition:

- * When play becomes over-competitive, so that winning becomes more important than playing, it can be destructive to many youngsters. Competition which results in the rejection of a child because he cannot play well enough or run fast enough can permanently destroy a child's interests and eagerness in taking part in group play. If there are too many such experiences a child may pull away from other children instead of eagerly playing with them.

PLAYING WITH SMALL CHILDREN

Playing with small chilren can be real fun. As the child care aide, the longer you are with a child the more fun it is. You have a big responsibility. Watch these things:

1. Be friendly but do not push yourself forward.

   Let the child take his time at getting acquainted. Watch and listen. Playing is serious business to him. He is trying out new things. Do not hurry or direct him unless danger threatens. Let him explore for himself.

   If he is shy, you might talk a little about his toys and how they work. He feels more at ease if you talk about something outside himself, as his wagon or his shoes. Play with him when he wants you to. Help him only if he needs you. He may need more assistance when he is tired or hungry.

   Encourage older children to assist younger ones. Show them how to share or take turns with their toys. Do not let them get too tired.

2. Do not interrupt more than necessary.

   If you have to stop a child's play, tell him ahead of time so he will be ready. You might say, "Let's finish our building quickly so we can get ready for lunch." Tell him in a quiet, firm way what he is to do and why. Do not boss him; give as few directions as possible.

3. Keep the child safe.

   This is your biggest responsibility. See that the toys he uses are safe--with no sharp edges or points, no paint or splinters that come off, and no parts small enough to swallow. Try to see ahead whether he is getting in danger. To avoid an accident, remove him from danger; show him the safe way to do it or interest him in playing something else. Never leave a small child alone.

4. Keep the child comfortable.

   During hot weather, particularly, avoid letting the child become overheated and tired. Do not let him stay out when he is too hot or chilled, and wet.

THE ROLE OF PLAY IN DEVELOPMENT

Age is the basic factor which causes variations in a child's play. The patterns of play continually change and become more complex as the child grows and develops.

The interests of children take on a chronological order. Play at first is quite simple, consisting primarily of random movements of the arms and legs. These random movements gradually develop into skills. The infant is able to make use of simple toys by pulling at them, twisting them, and biting them.

By his second birthday, the child's attention is directed toward the meaningful elements of toys. The toy is now used not merely for exploring but as an object or thing with certain simple characteristics. The doll is animated and personified. The toy dog may bark. Two or three blocks become a train. The make-believe play of the child is based on the culture around him. On the farm, sticks may become horses and cows, while, on the other hand, the urban child may identify some object as a fire engine.

The play of the three-year-old should provide ease in motion, freedom for great physical activity, and opportunity for absorbing a great deal through the senses. There should be stairs, boxes, and chairs for experimental climbing. Wagons to pull and ropes to swing on help the arm and back muscles, as well as the leg muscles, to learn to adjust quickly. The senses of sight, hearing, and touch are all appealed to when the child is furnished with big balls to roll and catch, sand and water for mud pies, and utensils to bang and pound with.

Four and five-years-olds use considerably more complicated play material. Blocks are now used to make a house instead of just a train. The boys turn more and more toward automobiles, airplanes, and soldiers, while the girls develop more elaborate techniques for caring for their dolls and playhouse equipment. At five, boys and girls play together, and their activities are often complementary to each other.

Six-year-olds begin to enjoy group play. Both boys and girls enjoy active games. Boys are definitely interested in wheel toys and construction sets, whereas girls become particularly interested in jumping rope. Clay, paints, and other materials of this nature are used.

QUESTIONS:

1. Mrs. Smith told Jane, a child care aide, that she did not plan to send her four-year-old to nursery school because all the children did was play. How would you answer this comment? What could you say to Mrs. Smith about the value of play?

For items 2-7, match the activity with the age at which it is most likely to occur. The ages may be used more than once.

ACTIVITY

2. Three children play together for a period of time--show tendency to be bossy
3. Two children play with cars and trucks side by side
4. Child moves blocks around without actually building anything
5. Group of children build a fort--work at it until it is finished
6. Children play together, but rapidly change activities and children with whom they are playing
7. Begin to use props, such as dress-up, for dramatic play

AGE

A. 2 years
B. 3 years
C. 4 years
D. 5 years

8. Sally is supervising the four-year-olds as they play outdoors. What should she do in each of these situations?
   a. Billy is at the swings. Sally should
      1. encourage him to pump.
      2. push him as high as he wants to go.
      3. make a game out of swinging.

   b. Jim is playing at the slide. Sally should
      1. teach him how to stop as he comes down the slide.
      2. hold his hand as he slides down.
      3. watch him carefully as he tries different ways of going down the slide.

   c. Billy is at the walking boards. Sally should expect him to
      1. be able to walk unaided across the board.
      2. want her to hold his hand as he walks along the board.
      3. ask for a narrower board to walk on.

9. Jeff was skipping around the room and did not want to stop to wash his hands for lunch time. How would you handle this situation?

10. Give at least three reasons blocks are such an important part of indoor play.

11. Several children were playing house. The child care aide noticed that they were setting the table incorrectly for their tea party. She joined them and explained how to do it the right way. Do you agree with what she did? Why or Why not?

12. According to Read (The Nursery School), what is meant by "the process is more important than the product" in relation to art activities?

13. During the painting session, one of the children asked the teacher to paint her picture for her. What would you do in this situation?

ASSIGNMENTS:

I. If possible, observe the children while they are involved in dramatic play. Describe the incident and then arrive at the answers to these questions. Did their play seem to fit into any of the reasons given in Read, pp. 282-289 for dramatic play? What feelings did they seem to be expressing? What roles did the children take? Did they seem to receive a feeling of satisfaction from their play?

II. If you have an opportunity to help the children at your training station with painting or clay activities, describe the differences in the way they paint or use clay. What conclusions would you draw about directing these kinds of activities? (Review pp. 310-318 in Read and pp. 454-458 in Todd).

III. Plan an art or craft activity for the children at your training station. What guidance do you intend to give the children? What do you expect the children to gain from this experience?

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UNIT VII-1

BOOKS AND MUSIC FOR CHILDREN

SUBJECT: Tell Me A Story

TASK: May relieve teachers, when needed, by reading stories to children, conducting finger plays, and leading songs

OBJECTIVES: Be able to
(1) describe importance of books and stories in child's development
(2) select stories to read at the center
(3) practice techniques of story telling
(4) evaluate books for young children

REFERENCES: Required: Leeper, Sarah Lou. *Good Schools for Young Children.* New York: The Macmillan Company, 1967. pp.192-201.

Todd, Vivian and H. Heffernan. *The Years Before School.* New York: The Macmillan Company, 1965. pp. 409-439.

Supplementary: Scott, Louise Binder and Thompson, J. J. *Talking Time.* New York: McGraw-Hill Book Company, 1966.

A child does not accidentally develop appreciation for and positive feelings about books. He learns this from the people with whom he comes in contact. Among things the child may learn from the child care aide are (1) to appreciate literature, (2) that stories help him to learn about the world in which he lives, and (3) how to take care of books. It is hoped that the child will develop these attitudes as he has enjoyable experiences with books.

Some suggestions for evaluating a book for children are:

1. It should have qualities that will appeal to the aesthetic senses.
2. It should deal with everyday experiences.
3. It should challenge the child's imagination and stimulate creativity.
4. It should create new horizons.
5. It should deepen understandings of human relationships as well as things.

The following variety should be included in a collection of books for children:

1. poetry
2. nature stories
3. holiday fun
4. folk stories
5. everyday experiences
6. stories that stimulate creative expression

A good collection of books is not enough. To be meaningful in the lives of children, they must be used. If the books placed on the reading table are changed frequently, the children will not become so accustomed to seeing them that they will ignore them. The way books are used should be planned ahead. Do not always use books as just a "fill in," but plan for specific story times.

HOW TO CHOOSE STORIES

Preschoolers enjoy stories:
...about things that go--trains, fire engines, boats
...about animals
...with jingles
...about themselves
...about things they know--the grocery store, the farm
...told in small groups for short periods of time

Criteria for selecting stories:

1. Simple, logically developed plot
2. Repetition, catch phrases, and/or rhymes
3. Familiar setting and events
4. One main character
5. Plenty of conversation
6. Language which is familiar, colorful, flows easily and simply
7. Simple, satisfactory climax
8. Pace suited to child's attention span and the purpose of the story

BOOKS, STORIES, AND POETRY FOR YOUNG CHILDREN

	THREE YEARS	FOUR YEARS	FIVE YEARS
Content	Familiar experiences: Real people, trucks, or animals	People, animals or things not in immediate environment: naughty children, toys that do bad things	Animals that act like human beings
Format	Many pictures--few words, rhymes, sound is important	Simple plots, nonsense rhymes and words	Being read to, looking at books, and pretending to read

TELLING THE STORY

Study the story by reading it over and over. As you practice it in front of a mirror, vary your voice and enjoy the story. Do not try to tell a story you dislike or do not know well.

Find a place to tell the story which is quiet, comfortable, and isolated. It might be under a big tree, or in the shade of the building, on the steps, or in a grassy area in a corner. Occasionally you may wish to give it a name--"Story Steps," "The Magic Ring," or "Make-believe Corner."

At last you are ready to tell the tales. Self-conscious? Need some techniques? Here are some trade secrets!

Start and maintain a small tradition that adds color and mystery.
...With a stick or wand, draw a circle around the group and sit in the magic ring.
...Bring a bright colored, long ribbon and have everyone grasp the magic cord.
...Wear a special hat, putting it on only when the story starts--a tall, black "witches hat," a "royal crown," or a "party hat."
...Consult a "Magic Mirror" to tell what story to tell.
...Use a doll or hand puppet, or stuffed animal if you feel self-conscious, and pretend that it is telling the story.
...Do not be afraid to pause or whisper or yell if the story demands it.
...Seat the group so their backs are to distractions and late joiners.
...If sudden distractions come up, have the children close their eyes for a few moments during the story.
...Try variations, such as felt cut-outs, flannel boards, or sketching with chalk or crayons on a large piece of paper as the story develops.

FROM STORYTELLING TO DRAMATICS

Just a few short steps can lead you from stories to dramatic play. After hearing the story, you can guide the children to pantomime the action by

...Playing house, store, nurse, or doctor
...Doing impersonations of trains, planes, animals
...Acting out simple rhymes, jingles, Mother Goose stories, or simple tales

Two guides when selecting books for children are (1) the Caldecott Award which is given for the best picture book of the year and (2) the Newberry Award which is given for the best children's book of the year. Books which have received these awards are marked with a gold seal so they can be easily identified.

Additional help in the selection of books may be obtained from the New York Times book review section, Parents' Magazine book section, and annotated book lists put out by publishing firms and professional organizations, such as the Association for Childhood Education International.

A listing of books and records for children may be obtained from:
The Children's Music Center, Inc.
5373 West Pico Boulevard
Los Angeles, California 90010
Request copies of "Records and Books for Headstart" and "The Best Records and Books for Very Young Children."

QUESTIONS:

1. Linda is to have charge of the story hour this morning. One of the decisions she must make is whether to tell or read the story.
   a. What are the advantages of both methods?
   b. What can she do to encourage children to listen to the story?

2. What age child would you expect to enjoy the following kinds of stories?
   _____ a. A story about a little boy and his family
   _____ b. A story about a bear who talks and acts like a human being
   _____ c. A poem that rhymes and includes nonsense words
   _____ d. A story that tells how things grow

3. Betty, the child care aide, read a story about witches and cruel stepmothers to a group of four-year-olds. Do you think this kind of story was a good selection? Why or why not?

ASSIGNMENTS:

I. A. Select at least three of the books in the child care center where you are employed and evaluate them in terms of the criteria listed on page A-122 of this unit.
   B. Would the books help children in meeting any of the needs discussed in Todd, pp. 410-416?
   C. If so, briefly explain why you think it would help meet the need(s) you selected.

II. Select a story to read to the children and practice telling it until you can do so effectively and can feel comfortable about doing it. If possible, plan for some aids, such as a flannel board, to use when telling the story.

UNIT VII-2

BOOKS AND MUSIC FOR CHILDREN

SUBJECT: Sing Me a Song

TASK: May relieve teachers, when needed, by reading stories to children, conducting finger plays, and leading songs

OBJECTIVES: Be able to
(1) describe importance of music and finger plays in child's development
(2) plan techniques to use when teaching songs to children
(3) recognize the developmental sequences for music activities
(4) perform some finger plays

REFERENCES: Required: Todd, Vivian and H. Heffernan. The Years Before School. New York: The Macmillan Company, 1965. pp. 466-491.

Supplementary: Scott, Louise Binder and Thompson, J.J. Rhymes for Fingers and Flannelboards. New York: McGraw-Hill Book Company, 1960. (The entire book is devoted to words and actions for finger plays.)

Music is one of the teacher's most successful tools in preventive discipline. It is a source of spreading cheerfulness and of releasing tensions and frustrations. The poetry of music is the best way of teaching phonics to the pre-school child. Movement to music provides excellent physical education.

What teaching material can be as inexpensive? The body can provide its own rhythm instruments; the voice can provide the orchestra; the imagination can be a book of verses.

MUSIC FOR YOUNG CHILDREN

ACTIVITIES	THREE YEARS	FOUR YEARS	FIVE YEARS
Listening		Records with rhythm--definite tone colour	Familiar records Story records Folk records

ACTIVITIES	THREE YEARS	FOUR YEARS	FIVE YEARS
Singing		Folk songs	Catchy songs
Singing Games	Group singing	Singing games	Singing with records
Movement to music	Dressing in costumes Shaking, waving, hitting, hammering	Free movement to music	Dancing--free style
Instruments	Bells, gourds, rattles, cymbals, rhythm sticks, large chimes African drums	Wooden music bars, Xylophone, drum	Chimes, bells gong, and mallet

Rhythm activities are enjoyed by most preschool children. Suggestions for making a variety of rhythm instruments follow:*

Sand Blocks:
Wooden blocks that fit the hands, sandpaper (#0 or #1) glued or tacked in place.

Cymbals:
Pair of lids or pie plates with handles of knotted cord or leather, or knobs or spools held in place with a bolt and nut.

Rattle:
A handle (Dowel stick or straight twig) fastened to a container, (box, can, carton) in which rattle noisemakers are placed (gravel, seeds, stones). Experiment for desirable tone before lid is permanently closed.

Jingle Bells:
Sleigh bells securely tied or held by straps and tacked to a stick.

Drums:
Use a strong, round container open at one end or both. Cover with a smooth, taut covering (skin, rubber, flexible plastic) held in place by tacks, tightly wrapped, and tied with cord, wide rubber bands, or cord or thong lacing.

Nail kegs, barrels, waste baskets, pails, buckets, flower pots, gourds, and wooden chopping bowls can be used to make drums. Containers should be smoothed, then painted. Secondhand drumheads can be obtained from some music shops. Soak the calfskin in cool water for 20 minutes, then tack on drum. Drumhead will contract when dry.

Drumsticks:
These can be made of a ball of twine, cloth, or wooden block attached to a stick.

Tuned glasses or bottles:
These are tuned by pouring water into the container. A small amount for a high note, a larger amount for a low note. Nail polish can be used to indicate level of water on glasses. Simple tunes can be played on them.

Tambourines:

Two 5" circles of 1/2" plywood, a pie plate, embroidery hoops, or wooden frame covered with a smooth, taut covering of skin, parchment, or plastic, or nylon coated with shellac.

Rhythm Sticks:
These can be made of two pieces of doweling wood about 1" long, 1/2" wide, that has a pleasing sound when struck together. Discarded chair rungs are satisfactory.

Gongs:
These can be made by striking a horseshoe, round metal tray, or heavy brass bowl.

Flower Pots:
These can produce bell tones. Take four pots of different sizes. Invert them and insert knotted rope through the hole of each one. Suspend from a frame or broom handle.

Fiddle:
This can be made from a cigar box. Cut oval hole in lid. Insert narrow board at one end for the neck. String of nylon or cut gut can be fastened by tiny screw and raised by a bridge or small piece of doweling wood. Strings can be fastened by wooden pegs.

*These suggestions were prepared by Carol Seefeldt, University of South Florida.

MUSIC ACTIVITIES

There are many activities which can be related to music. Several suggestions for musical activities follow:

As children march to the music, suggest that they stamp loudly when the music is loud, tiptoe quietly when the music is soft. Children enjoy the physical activity of this game, which can be used with the whole group, or with individuals with special needs.

Let the children put their cheeks against the drum to feel the vibrations or watch the piano strings vibrate.

Ask children to place their hands on your throat while humming. What do they feel?

Direct children's attention to the pitch of sounds by having them listen to a note struck on the piano, then a note struck an octave above or below the first.

Have a parade. Let half the class watch and clap to the music and the other half close their eyes and listen to the parade. What sounds do they hear? Reverse roles and repeat.

Let the children draw pictures to suggest the sounds they hear in a song.

Make simple rhythm instruments. Use during music or story time to make sound effects. When they think they hear someone who is angry, beat the drum; excited, shake the bells, etc.

SOME SONGS AND FINGER PLAYS FOR PRESCHOOLERS

Songs:

Train is A-Coming

Train is a-coming, oh yes.
Train is a-coming, oh yes.
Train is a-coming, train is a-coming.
Train is a-coming, oh yes.

Better get your ticket, oh yes.
etc.

Johnny is the engine, oh yes.
etc.

Mary Wore Her Red Dress

Mary wore her red dress, her red
dress, her red dress.
Mary wore her red dress
All day long.

Danny wore his blue shirt...etc.

Johnny was a tall Indian...etc.

Indians In a Teepee

Five little Indians in a teepee
Sleeping quietly as can be.
Along comes the chief, and what
do you think?
Up jump the Indians quick as a
wink!

Clap Hands

Clap, clap, clap your hands
Clap your hands together.
Clap, clap, clap your hands
Clap your hands togher.

Poke, poke, poke your nose.

Pull, pull, pull your ears.

Nod, nod, nod your head.

Wiggle, wiggle, wiggle your
fingers, etc.

What Shall We Do?

What shall we do when we all go out,
all go out, all go out.
What shall we do when we all go out,
to play?

We shall swing on the swing when we
all go out, all go out, all go out.
We shall swing on the swing when we
all go out to play.

We shall slide down the slide...
etc.

We shall play in the sand...
etc.

Can You

Can you hop like a rabbit?
Can you jump like a frog?
Can you waddle like a duck?
Can you run like a dog?
Can you fly like a bird?
Can you swim like a fish?
Can you sit still like a good
little child?

Finger plays:

Open, Shut Them

Open, shut them.
Open, shut them.
Give a little clap.
Open, shut them.
Open, shut them.
Lay them in your lap.

Creep them, creep them.
Creep them, creep them.
Way up to your chin.
Open wide your little mouth,
But do not let them in.

Three Balls

Here is a ball (form circle with
thumb and forefinger)
And here is a ball (form circle
with thumb and all fingers
touching)
And here is a great big ball.
(form large circle with arms
over head, fingers touching)

Here's A Bunny

Here's a bunny with ears so funny
(bend two fingers)
And here is a hole in the ground
(other arm akimbo)
When a noise he hears
Up pop his ears (two fingers pop
straight up)
And he hops in a hole in the ground.
(jump into arm hole)

Traffic Light

Stop says the red light (hold palm
of hand out)
Go says the green (point finger out)
Wait says the yellow light, flashing
in between. (open and close hand)
Watch all the cars and see them obey.
(form glasses with finger and thumb)
Red, green and yellow light
Showing them the way.

Grandmother's Glasses

Here are grandmother's glasses
(form circle with thumbs and fingers around each eye)
And this is grandmother's cap
(form point with hands on top of head)
And grandmother folds her hands
And puts them in her lap.

These are grandfather's glasses
(form larger circle around eyes)
And this is grandfather's hat
(form hands straight up on head)
And grandfather folds his arms
JUST LIKE THAT.

The Orange Tree

Way up in the orange tree
Five little oranges smiled at me
I shook that tree as hard as I could
Down fell the oranges
M - m - m were they good.

Night

My eyes can see
My mouth can talk
My ears can hear
My feet can walk
My nose can smell
My teeth can bite
My lids can flutter
My hand can write
But when the sandman comes at night
Scatters sand, turn out the light
I'll say "Good Night" to you and you
Each part of me says "Good Night" too.

Right and Left

This is my right hand,
Raise it up high
This is my left hand,
I'll touch the sky
Right hand, left hand
Twirl them around
Left hand, right hand
Pound, pound, and pound.

This is my right foot,
Tap, tap, and tap
This is my left foot,
Pat, pat, and pat.
Right foot and left foot
run, run, and run
Left foot, right foot
Jump for fun.

Hands on hips, hands on your knees
Put them behind you, if you pease.
Touch your shoulders, touch your toes
Touch your knees and then your nose
Raise your hands 'way up so high
And let your fingers swiftly fly
Then hold them out in front of you
While you clap them one and two.

Ten Little Fingers

I have ten little fingers
And they all belong to me
I can make them do things
Would you like to see?

I can shut them up tight
Or open them wide
I can put them together
Or make them all hide.

I can make them jump high
I can make them jump low
I can fold them up quietly
And hold them just so.

Relaxation

My feet are still
My legs are still
My hands are folded and still
My arms are still
My shoulders are still
My lips are still
My eyes are still
This is my quiet time.

This Little Froggie

This little froggie broke his toe,
This little froggie said, "Oh, oh, oh."
This little froggie laughed and was glad.
This little froggie cried and was sad.
This little froggie so thoughtful and good
Ran for the doctor as fast as he could.

What Can I Do?

Am I strong? Sure I am. Here let me show you my muscle (demonstrate)
Can I fight? Sure I can. Let me show you how I tussle. (prize fighter posture)
Can I pitch? Sure I can. Just watch me bat the ball (toss up and bat ball)
Will I swim? Sure I will--and dive off the highest wall (breast stroke and diving position)
Can I climb? Sure I can--up to the top of the tree (climbing)
Can I chin myself? I can. Are you watching me? (fists over head, rise on toes; lower arms and level with chin)

The Family

This is my father (hold up thumb)
This is my mother (hold up pointing finger)
This is my brother tall (hold up middle finger)
This is my sister (hold up ring finger)
This is the baby (hold up little finger)
Oh, how we love them all!

QUESTIONS:

1. The child care aide, Sally, is going to teach the the children a new song. Which of the following would you recommend that she do?
   _____ a. Be sure to teach the entire song at one time so the children will not become confused.
   _____ b. Introduce the song with a story.
   _____ c. Wait until the end of the day for the music period.
   _____ d. After singing the entire song, repeat sections of it for the children to begin to sing with her.
   _____ e. Select a simple song.

2. During free play time, Billy starts pounding on the table in a rhythmic manner. Soon another child picks up the rhythm. What would you say?
    a. Be careful or you will knock the game off the table.
    b. Let's do our puzzles now and have rhythms later.
    c. I like Billy's rhythm.

3. According to Leeper, children pass through a developmental sequence as they learn to sing. Arrange the stages listed below in the order in which they would be likely to occur.
    a. Sings alone
    b. Recognizes songs sung by others
    c. Joins in with an occasional word when someone else is singing.
    d. Sings with an adult but does but always stay in time with them.
    e. Sings with a group and is able to match tones.

ASSIGNMENTS:

I. What musical activities have you observed at your training station? Suggest two or three things you could do as you work with the children to help them enjoy and learn more about music and rhythm. Review the assigned readings for ideas.

II. Refer to Leeper, pp. 361-368, and select the developmental sequences at which you think the children at your training station are in terms of:
    a. singing
    b. listening
    c. rhythmic experiences
    d. creating

III. Practice (and show the class or your teacher) at least five finger plays.

UNIT VIII

TOYS AND GAMES FOR CHILDREN

SUBJECT: Fun and Games

TASKS: Helps prepare and assemble play materials needed by teacher and/or director

Arranges physical environment, under supervision of director, appropriate for play and learning experiences

OBJECTIVES: Be able to (1) evaluate play materials for specific activities
(2) recognize games, play materials and equipment that meet specific needs of children
(3) recognize procedures to follow when directing children's games
(4) plan games to teach children

REFERENCE: Supplementary: Boston Children's Medical Center. What to Do When "There's Nothing to Do." New York: Delacorte Press, 1968.

TOYS AND PLAY EQUIPMENT

The following characteristics may be used as a guide in evaluating toys and play equipment:

Free of detail with round, not sharp, edges
Versatile in use
Involves the child in its use
Large, easily manipulated
Material suitable for its use
Material pleasant to touch
Pleasing color, nonpoisonous paint
Nonflammable
Durable
Can be easily cleaned
Works as intended
Construction easily comprehended
Encourages cooperative play
Will withstand weather conditions and hard usage
Price based on durability and design

In addition to the above characteristics, the following questions should be considered in the selection of toys and play equipment:

> Does the article stimulate in children curiosity...interest... imagination...manipulation...initiative...problem-solving... creativity?
>
> Does it develop muscle coordination...freedom of movement... manual skills?
>
> Does it promote growth toward...independence...exploration...group activity...social relationships?

TOYS FOR THREE . FOUR . FIVES

Children in this age group are beginning to be able to control their fine muscles and, at the same time, their large muscles are still growing. They are leaving individual and parallel play for group play. Suggestions for toys to strengthen the child intellectually, physically, and emotionally follow.

DRAMATIC PLAY, IMITATIVE OF ADULT LIFE

Dolls and housekeeping toys such as dishes, furniture, telephone, broom (Children get more use from these if they are somewhat near life size and are sturdy enough to be actually used.)

Dress-up clothes, shoes, hats, pocketbooks, neckties, briefcase

Puppets, puppet theater

Storekeeping toys, cash register, empty food containers

Farm animals, barn, fences, tractor, truck, derrick

Trains, trucks, boats, airplanes

Large cardboard cartons for building homes, stores

INTELLECTUAL DEVELOPMENT

Wooden building sets and interlocking blocks

Puzzles with 4 to 30 pieces, depending on child's ability

Hammer and peg sets, counting frame

Magnet, kaleidoscope

Aquarium, terrarium

Simple games, such as cards to match

Books with large pictures

PHYSICAL DEVELOPMENT

Walking board, rocking boat, climbing steps

Large hollow blocks (painted for outdoor use) and boxes

Smaller blocks based on one unit (that is 4, 8, 12 inches)

Swings, slides

Climbing bars, rope ladder, gym sets (Set the frame into concrete, if possible.)

Ladders; barrel; saw horses; smooth, wide boards

Bean bags, balls

Pounding bench

Tool chest

Big cars and trucks for hauling and riding

Cars and trains for pushing

Wagon, sled scooter, tricycle, doll carriage, wheelbarrow

Hoop, roller skates

Rubber horseshoes

Small sports equipment

Inflated balls, bag, or doll to punch

Sturdy gardening tools

EMOTIONAL DEVELOPMENT

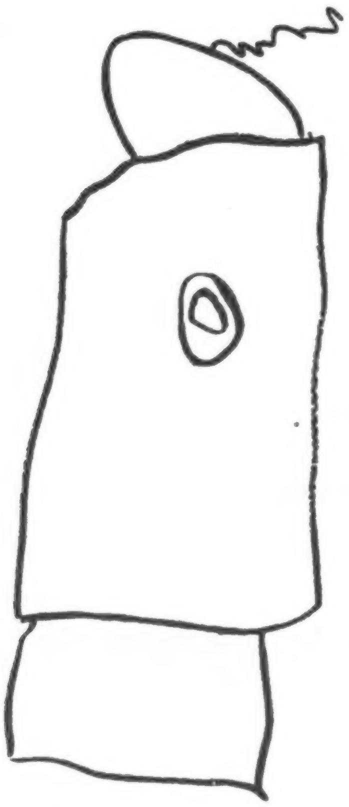
Clay, paints, brushes, crayons

Scissors, paper, paste

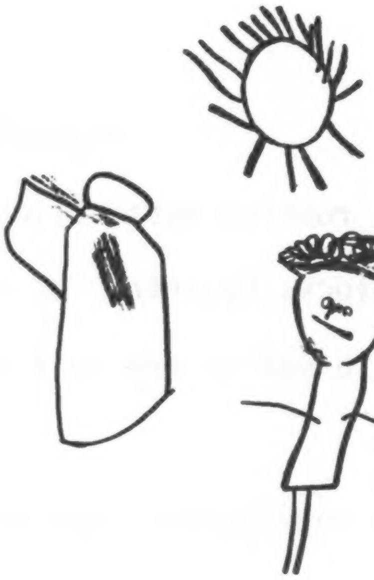
Muscial instruments, record player, records

Sandbox and toys

Puppets



"House"
Drawn by a three-year-old



"House, 'Rayed' Sun, and Girl"
Drawn by a four-year-old

HOMEMADE PLAYTHINGS

A variety of types of playthings can be made from household items and/or a limited amount of additional supplies. Particularly in cases where funds are limited, the following suggestions may be useful in adding to the play equipment which is available for the children.

Play Equipment to Promote Vigorous Physical Activity

SWINGING

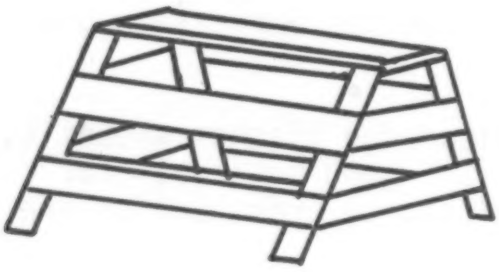
A most satisfactory swing for the young child has a broad seat, 24 by 24 inches, supported by four ropes knotted beneath the board at the corners and brought together to join the two main supporting ropes 30 inches above the board. This board does not tip, and allows the child to sit, kneel, lie down, or stand for swinging and several children may use it at one time.

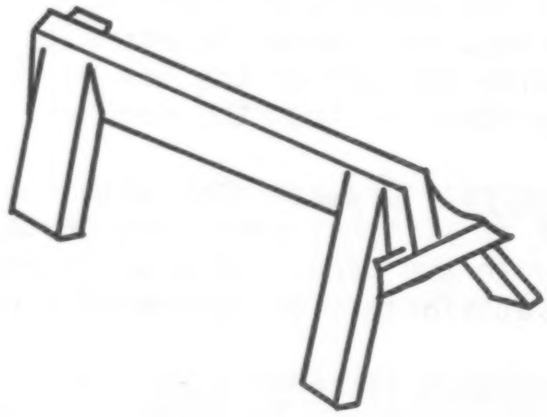
An excellent swing may be made from an old automobile tire fastened securely by a one inch rope to the limb of a tree, to a scaffold, or in a porch or garage opening.

CLIMBING

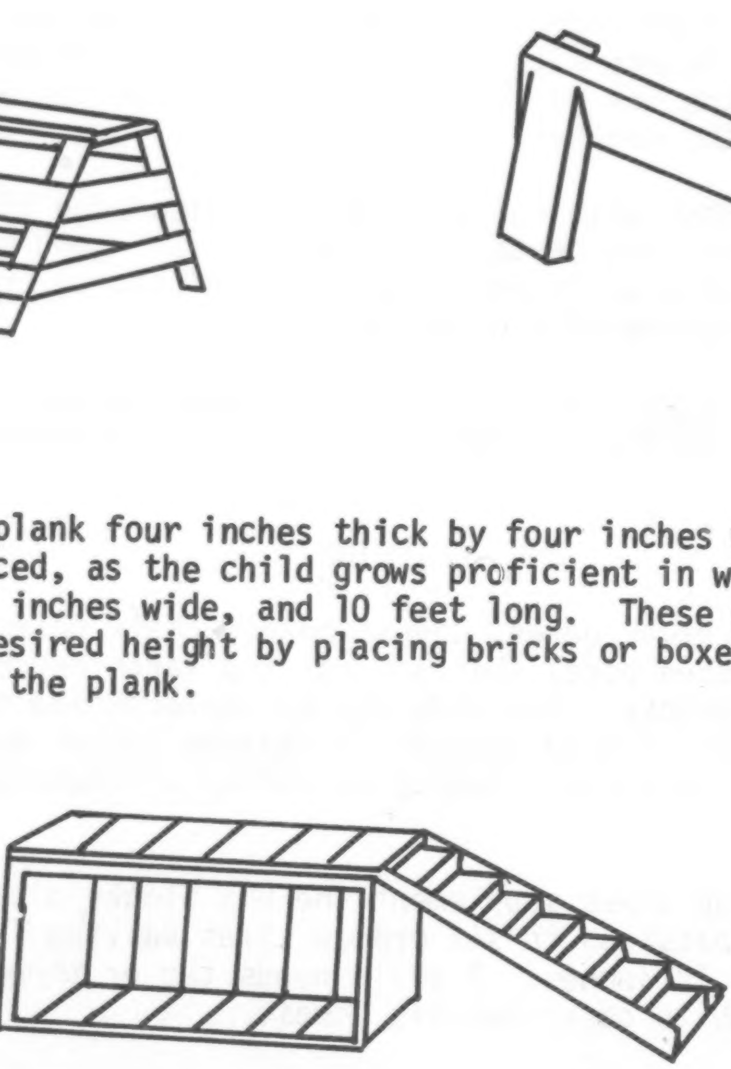
Packing boxes: Boxes of different sizes, ranging from the small soap-box size to the large packing-case size, may be used for climbing purposes and also for boat, store, train, house, or garage play.

Sawhorses: These sawhorses, which may be made in various sizes, together with planks, boards and boxes, make it possible for the child to create many climbing arrangements for himself. An old sawhorse may be converted to the child's use by adding more strips across the sides and ends.





Balance bean: A plank four inches thick by four inches wide by 10 feet long may be replaced, as the child grows proficient in walking it, by one 2 inches thick, 4 inches wide, and 10 feet long. These planks may be elevated to the desired height by placing bricks or boxes of that height under each end of the plank.



Steps: For the child whose home lacks steps leading to the porch, a sturdy packing box may be used, with steps built up to it on opposite sides. The risers of these steps should be 6 inches high and the treads 11 inches wide. This makes a good piece of backyard climbing equipment.

SLIDING

A plank: A smooth plank, 2 by 10 inches by 8 feet, may be elevated at one end on a packing box of suitable height. With a ladder or boxes arranged as steps up to the opposite sides of the packing box, such a board makes a satisfactory slide. It is one which the child can learn to arrange for himself.

Play Equipment for Manipulative and Creative Usage

SAND PLAY

Sandbox: Any good packing box of fair size, about 3 by 4 feet, may be used if it is cut to a 10 inch depth and lined with roofing paper to keep the sand from sifting through the cracks. Two or three hundred pounds of sea sand is an adequate amount. A cover for the sandbox, made to open from the center, will provide a surface on either side for sitting and working, and, when closed, will protect the sand in bad weather. The outside surface of the box may be painted to improve the appearance and to protect it from the weather.

Standbys: Cracker cans with rolled edges and discarded kitchen utensils, such as sifters, pans, egg beaters, and spoons, are good materials for play in the sand. Lard pails and other pails of sturdy construction are as satisfactory as purchased sand pails.

Receptacle for sand toys: A bushel or half-bushel basket or a large jumbo grape basket may be painted to make an attractive container for sand toys.

BUILDING

Box blocks: Wooden cigar boxes, cheese boxes, chalk boxes, dried-fruit boxes, and other wooden boxes that are not too large may be converted into excellent building blocks. The lids may be replaced and nailed securely to the boxes. A coat of good lacquer in rainbow colors makes box blocks attractive and easy to clean. Twenty or thirty of these blocks are adequate for one child.

Nested boxes: Nested boxes supplement the box blocks nicely. They are made from 1/4 inch basswood in six graded sizes varying from 4 x 4 x 4 inches to 12 x 12 x 12 inches. A child needs two or three such sets in order to have enough to carry out his ideas.

Nested cans: Nested cans also supplement the blocks and provide cylinders for building. Tin cracker and cookie cans with the lids replaced are very good. Vegetable or fruit cans from which the tops have been carefully removed so that the edge is smooth and rolled down may be lacquered. These may be of various sizes and nested together in sets of five or six.

GAMES FOR YOUNG CHILDREN*

When do children begin to enjoy games?

Children under four years of age are not likely to enjoy group games since they are not yet interested in or ready for the rules and amount of group organization which games involve. Children about five years of age begin to enjoy simple games and are usually ready to take part in this kind of play.

What kinds of games are suitable for young children?

The game should not have any hard and fast or complicated rules.

The game should not require any specific number of players, nor should it require a large number. It should be fun for three or four children or fun for seven or eight.

The game should give each child the opportunity to participate without having to wait for a turn (or, at least, not having to wait more than a few minutes).

Games which involve choosing sides or teams are not suitable for young children because the idea of team play means very little to them.

How to teach a new game to young children.

It is usually better to start right in and explain what to do as you are playing the game. You cannot expect little children to sit still and listen while you explain the rules ahead of time. You might start out, for example, by saying to two or three children, "We chould take hold of hands and make a circle and I could show you how to play Looby-Loo." (Others will no doubt join in as they see the game starting.) As soon as several of the children are in a circle, start going around as you sing or say "Here we go Looby-Loo, etc." Then stop the circle and you sing or say, "I put my hand way in, I put my hand way out," etc.

Quite often a child who already knows the game can do a better job of teaching it to other children than an adult can.

*These materials were prepared by the staff of the University of Wisconsin Nursery School.

Suggestions for helping children in playing games.

Very young children will usually need some direction and help from an adult, but do not stand on the side lines and just shout directions. Play the game right along with them. Sometimes, of course, you may be at the piano playing the music and may need to give a few directions or suggestions.

It is wise to avoid playing any one game for too long a time, although little children may enjoy repeating the same game two or three times. If the chilren seem to be getting too excited or restless, suggest another game. It is usually a good idea to alternate active games with the more quiet, sitting down games. Do not expect young children to play game after game; three or four games are usually enough at any one time. After that, the children are apt to become over-excited or tire.

If you have a fairly large group of children you can avoid making them wait for turns by suggesting, for example, that there can be two or three youngsters going "Round and Round the Village" at the same time. Another good idea is to have two smaller circles instead of one big one, both playing at the same time.

It is very important not to be disturbed if some children seem to disregard the "rules" or if some do not participate fully. Do not insist on each child's doing exactly right. Perhaps one child will want to be the Farmer in the Dell, but he does not want to choose a wife! Let the reluctant farmer stay in the game and quietly ask another child to be a farmer, too. Or, perhaps a child will want to play "Did You Ever See a Lassie," but he is content to be in the circle and does not want to "go this way and that way." Sometimes the children will suggest a different way of playing an old game or invent a new one. Let them experiment and have fun!

The games described here are generally suitable for children about 4-1/2 to 6 years of age, although some may be too difficult for youngsters who have had little experience in group play.

IMITATIVE GAME

Did You Ever See A Lassie. Children join hands in circle with one child in middle. All move around and around on first two lines of verse. For the last two lines, children drop hands and imitate child in middle who thinks of some way of moving, shaking head, etc.

"Did you ever see a lassie (or laddie), a lassie, a lassie,
Did you ever see a lassie do this way and that?
Do this way and that way, do this way and that way,
Did you ever see a lassie do this way and that?"

GUESSING GAMES

Guess Who. "It" is blind-folded. Leader points to another child who goes and shakes hands with "It." "It" tries to identify child by feeling his head and clothing. The second child may then become "It."

What's Gone. Put group of several objects (e.g. spoon, pencil, cup, key) in center of circle. "It" looks at the objects and then hides his eyes while another child hides one of the articles behind his back. "It" tries to guess what is missing. Can also be played by using papers of different colors, if children know colors well.

4

Who's Knocking at My Door. One child sits on chair in center of circle and hides his eyes. Leader points to a child who knocks on the back of the chair. Child in chair says, "Who's knocking at my door?" Second child answers "It is I" or "I'm knocking at your door." Child in chair tries to guess who it is. (Children are surprisingly good at this!)

What is It. One child covers his eyes. Different children take turns in pretending to be a horse galloping, trotting, walking, running or elephant walking or any animal making a noise in their motions. Child must guess which animal the class is acting as.

Identifying Objects. The leader has a variety of objects, such as a ball, a pencil, a toy boat and a toy automobile. She puts from three to six objects in a cloth bag at the same time. Individuals are asked to come up to identify the objects by feeling the bag.

CHOOSING GAME

Round and Round the Village. Children stand in circle, hands joined. One (or more) walks around circle as group sings or chants:

"Go round and round the village
Go round and round the village
Go round and round the village
As we have done before."

Then at next verse, children raise arms and "It" goes in and out under their arms.

"Go in and out the window
Go in and out the window
Go in and out the window
As we have done before."

On last verse "It" choose another child to become "It" by standing in front of him.

"Now stand before your partner
Now stand before your partner
Now stand before your partner
As we have done before."

HIDE AND SEEK GAMES

Cat and Kittens. One child is selected to be mother cat; three or four others are chosen to be kittens and they hide. As soon as they are hidden, they "meow" to the mother cat where they are.

Huckle, Buckle, Bean Stalk. Several children leave the room (or all play and hide their eyes) while leader hides an object in plain sight. At a signal the children return (or open their eyes) and start hunting for the object. As soon as a child sees it, he calls out "huckle, buckle, bean stalk" and sits right down without telling where the object is. Game continues until last child has seen object or until reasonable time has passed. Last child may be "It" for another game. (The younger children may not be able to keep from telling where the object is!)

GAMES OF SKILL

"Basket Ball". Children stand in a circle and take turns trying to throw a ball into a basket placed in the center of a circle.

Toss Ball. Children stand in circle. Leader calls name of child and immediately throws ball into air. Child hurries and tries to catch ball before it hits floor or on first bounce.

Duck Waddle Relay. The children stand in two lines. The first one on each side holds ankles with hands and walks to a goal and back. The next one starts as soon as the first returns until they have all been up to the goal. (Do not emphasize the race aspect for young children.)

Right and Wrong. Leader makes such statements as "Fish run, dogs bark, cows meow." If statement is right, children wave their hands; if wrong, they clap their hands once. May be simplified by having children wave their hands if correct, keep hands stiff if wrong. With older children, those who make a mistake may drop out of the game until only one remains.

Do As I Say, Not As I Do. Leader tells group to do what she says, but to listen carefully because sometimes she will try to fool them by doing something different. She gives such directions as "Put your hands on your head" (she does so). "Bend over" (she does so). "Put your hands on your toes" (but instead, she puts her hands on her back), etc. With older children those who make a mistake may drop out of the game until only one remains.

MISCELLANEOUS GAMES

Five Little Chickadees. As each verse is sung the "chickadees" who have been chosen to sit in a door fly from the line in turn, fly around the room once and go back to sit with the rest of the children.

"Five little chickadees sitting in the door;
One flew away and then there were four.
Four little chickadees sitting in a tree;
One flew away and then there were three.
Three little chickadees looking at you;
One flew away and then there were two.
Two little chickadees sitting in the sun;
One flew away and then there was one.
One little chickadee left all alone;
He flew away and then there was none.

Touch Me, Ball. Children in a circle. One child rolls a large ball across the circle. If the ball touches a child, he can then pick it up and send it rolling in another direction. (This game is sometimes call Postmen.)

Echo. A favorite rhyme may be used and two groups of children. The first group says the first line of the rhyme in a loud tone and the second group repeats it as an echo, in a small tone.

Telephone. Good for free play, but can also be very helpful in role playing or dramatic play. Children can use the phones to call the grocery, the fire station or one another. (A teletrainer from the Bell Telephone or from General Telephone may be obtained by calling and requesting it.)

POETRY

Poetry may be used in many ways to increase listening skills. The following poems may be used to emphasize certain sounds. Used as recreational material, the children will be interested in repeating them.

Song of the Pop Corn

"Pop-pop-pop" says the popcorn in the pan,
"Pop-pop-pop" You may catch me if you can!
"Pop-pop-pop" says each kernel hard and yellow,
"Pop-pop-pop" I'm a dancing little fellow,
"Pop-pop-pop" I can whirl and skip and hop,
"Pop-pop-pop."

A Jolly Noise

Ethel Jacobsen

Gurgle, gurgle, gurgle, gurgle
   Glug, glug, glug
Goes the milk from the bottle
When I pour it in my mug.

Gurgle, gurgle, gurgle, gurgle
   Glug, glug, glug
Goes the water down the drain
When I pull the bathtub plug.
   Gurgle, gurgle, gurgle, glug!

A Hurry Up Word
Emily M. Hilsabeck

Skedaddle!
I don't think I ever heard
Such a hurrying kind of word!
I like it, too; it has a sound
That in my mind goes round and round
And makes my feet skip off the ground!
Skedaddle!
    Skeedaddle!
        Skedad-dad-daddle!

QUESTIONS:

1. Beth and Sherry, child care aides, were directing games at the child care center. The were introducing a new game to the children. Beth told the children all the rules of the game--then Sherry followed with the instructions on how to play it. Do you think they will have good participation in the new game? Why or why not?

Place the letter of the major kind of experience each of the toys or activities listed items 2-11 provides for the child.

TOYS OR ACTIVITIES

_____ 2. Books
_____ 3. Scissors
_____ 4. Musical instruments
_____ 5. Dishes
_____ 6. Puzzles
_____ 7. Box of adult clothes
_____ 8. Peg board
_____ 9. Nails and hammer
_____ 10. Jumping rope
_____ 11. Crayons

KIND OF EXPERIENCE

A. Intellectual development

B. Dramatic and imitative play

C. Emotional development

D. Physical development and coordination

The items listed in questions 12-21 are characteristics which relate to guiding games for children. Check X for each response which is correct; check 0 for each response that is incorrect.

_____ 12. Allow the children to carry out their own ideas at times.
_____ 13. Change activities often so that they will not continue long at one thing.
_____ 14. Allow the children to repeat the same game.
_____ 15. Remind them often to keep clean as they play.
_____ 16. Insist that the children obey the "rules" of the game.
_____ 17. Give detailed directions when teaching a new game.
_____ 18. Stand at the sidelines and call out directions.
_____ 19. Take part in the children's games.
_____ 20. Choose games that require waiting for their turn so children learn to be patient.
_____ 21. Select team games.

ASSIGNMENT:

I. Select at least five of the toys or pieces of play equipment used at your training station.
    a. Evaluate them in terms of the criteria given on page A-135 of this unit.
    b. In what ways would these toys aid in the child's development?

II. Observe the children as they play outdoors and participate in activities that aid in their large muscle devleopment.
    a. What equipment is available which will promote the physical development of the children?
    b. What differences do you see between
        (1) boys and girls?
        (2) children of different ages in terms of ability to run, climb, throw a ball, push, pull, etc.?
    c. After observing the children over a period of time, do you notice any improvement in their physical skills?

III. Select at least three games to teach the children at your training station.

Home Economics
Instructional Materials Center
Lubbock, Texas

IX

UNIT IX

NATURE AND SCIENCE EXPERIENCES

SUBJECT: Look, Teacher!

TASK: Helps children with nature and science experiences

OBJECTIVES: Be able to (1) list attitudes which will promote children's interest in their environment
(2) plan science activities for children

REFERENCES: Required: Todd, Vivian and H. Heffernan. The Years Before School. New York: The Macmillan Company, 1965. pp. 298-343.

Supplementary: Kranger, Herman C. Nursery and Kindergarten Science Activities. Jenkintown, Pennsylvania: Prime-Ed Company, 1967.

Rieger, Edith. Science Adventures in Children's Play. New York: The Play Schools Association, 1968.

EXPERIMENTS AND ACTIVITIES

One of the essential learning activities in the day care center is providing opportunities for the child's discovery of the world through sensory perception, investigating, and watching. Following are some suggestions to follow in order to assist in the development of the child's experiences in science and nature.

Interest may be aroused in seeds through the following activities:

Plant seeds--beans are big enough that children can observe them sprout and grow. Use a glass jar. Line it with paper towels. Wet them thoroughly and slide the bean seeds in between the glass and the towels. The children may readily observe the seeds sprouting and the leaves bursting forth.

Another alternative is to fill a glass jar with sawdust and wet it thoroughly. Slide seeds between the sawdust and the glass jar. The children may readily observe the seeds sprouting and the leaves bursting forth.

As the above experiments are planned for and carried out, it is wise also to plant some seeds in earth so the children can see how the leaves reach up to the light.

Bring in some Indian corn. Discuss corn. Plant some of the seeds. Let the children watch them sprout (same as suggestions above). Lead the discussion on into the uses of corn. Cut some off the cob and cook it. Leave it out on the science table for the children to taste. Cut some corn off the cob and leave it uncooked in a dish beside the cooked corn for the children to compare the taste of the two. This can lead to a discussion of other uses of corn, such as corn flakes or corn syrup. Corn meal could be discussed and perhaps tasted. Try to arrange for the serving of corn muffins or corn bread in the lunchroom. A display can be arranged in which dry corn kernels are placed in one section of a muffin tin, corn meal in the next section, raw corn in the next section, and a cooked muffin in the last section. This can be followed by a tasting party. The same type of experience could be planned for wheat and then Little Red Hen could be read.

Plant some grass seed in egg shells. Draw a face on each and set them on a wall like Humpty Dumpty. Teach Humpty Dumpty at the same time. From time to time, Humpty Dumpty will need a hair cut.

What about other seeds? A walk around the playground may help you to encounter some other seeds, e.g. acorns. Gather these seeds, plant them in paper cups, and watch what may happen.

Bring a coconut to school. Leave it on the science table. At a group meeting discuss it, open it, and give each child as opportunity to taste the meat. Some may be grated and served with fresh oranges and grapefruit.

Place an avocado on the science table. At circle time wash it off and cut it open. Permit each child to have a taste. Plant the seed.

Think - think - think - what seeds do you know about which have interesting results if planted? If tasted? If cooked? Do not hesitate to put out the plants, e.g. carrot or potato, for children to feel and examine. Wash them off at circle time (a good health lesson), cut them up, and let each child have a taste. Plant the top of the carrot in water. Watch what happens. Plant the eye of the potato. What happens?

Put out a display of different vegetables. Draw some pictures of the vegetables and write the names of the vegetables under the illustrations. Let the children match the illustration and the vegetable. The same activity could be planned using fruit.

Cut open an apple so you can see the seeds. Also observe the star when cut crosswise. Cook the apple. Cooking is an excellent way to open discussions of heating and cooling. Let the children observe the changes which occur--crisp, crunchy apple to soft, smooth apple.

Compare what happens to plants which are placed in the sunshine and the ones which are left in the dark.

Put a yellow or white flower or a stalk of celery in colored water. Leave overnight and let children observe what happens. The flowers have the most startling results, for by the next morning each will have turned a different color. Discuss why.

SCIENCE EQUIPMENT

Humidity Indicators: Absorbent paper, such as white blotting paper, soaked in a solution of cobaltous chloride and dried, provides the basis for several different forms of a type of humidity indicator. Treated paper remains blue when the air is very dry but turns pink in very moist air. Use treated paper for the sky portion of landscape pictures or drawings, skirts for weather dolls, weather flowers, and ears or tails of animals drawn by the children.

Feeding Station: Drill or punch four equally-spaced holes in rim of pie tin. Tie two foot lengths of heavy string or light wire through holes and suspend station from limb of tree.

Insect Cages: A variety of insect cages can be made using screen wire and materials to form the top and bottom. Cages which are the easiest to make start with a cylinder of wire screen. Tops and bottoms may be pie tins, pieces of wood, or tips from large ice cream cartons. Cardboard boxes with clean, cellophane windows also make suitable cages.

Chicken Brooder: Any convenient size cardboard or wooden box will serve as a brooder. Any ordinary desk lamp inside box will provide sufficient heat to hatch eggs.

Supplementary Materials: Every experienced teacher has his special store of properties to which he is constantly adding. This list is just a suggestion:

Several pieces of hose (firemen, gas station)
Steering wheels, lights, gear shift (mounted on wood blocks)
Pipe, faucets, door lock and padlocks, and keys, springs, pulleys
Fishing poles (made of doweling, heavy cord, and cup hooks)
Fish from plywood or cloth
Bells for train, boat, or fire engine
Alarm clock (with ringing alarm)
Scales
Cash register
Cartons and labeled cans for market
Tool kits (lunch box with oil can, pliers, flashlight)
Red Cross kits (lunch box with band aids, plastic pill bottles)

Hats, caps, and helmets for fireman, sailor
Hand baggage for traveling
Wind toys, kites, pinwheels, balloons, scarves
Thermometer, magnifying glass, magnet
Pet cage, bird cage
Glass jars, aquarium, terrarium (restaurants will often supply large-mouthed jars suitable for aquariums and terrariums)

EXCURSION TECHNIQUES

Value of the Excursion

It provides the child with first hand experiences and observations.
It acquaints the child with his environment.
It helps increase and consolidate the child's understanding of his social world.

Teacher Preparation

Think through goals of the excursion.
Be familiar with the place to be visited.
Obtain permission for the visit and make arrangements with the proper authorities in advance.
Discuss briefly with the contact person what children expect of the visit.
Plan for transportation and finances.
Discuss excursion with administration before making final plans.
Complete school requirements necessary for leaving school grounds.
Obtain written permission from parents.
Obtain necessary adult assistance for trip.
Discuss trip with the children.

Class Planning

Discuss and list desirable standards for group behavior.
Discuss and list safety measures to be followed.
List questions children would like to have answered.
Select children to ask these questions.

Taking the Trip--The Teacher Should

Carry a first aid kit or tissues and band aids.
Have all children use the bathroom and get water before departure.
Have at least one adult assistant to every six children, if possible.
Explain and interpret experiences.
Direct children's observations.

Follow-up Activities

Make an evaluation of the trip through group discussions, dramatizations, and creative projects.
With the aid of the children, write a thank you letter to the place visited.

QUESTIONS:

1. What kinds of attitudes on the part of the teacher help to promote a child's interest in his environment? (List four)

ASSIGNMENTS:

I. Study the sections in Todd which describe science activities for the present season of the year. Select several of these suggestions and add some of your own to use with either individual children or a group of children. Write out what you plan to do and discuss these ideas with your teacher.

II. Select (or add your own) at least five or six ideas from Todd, pp. 322-343, "Understanding the Body" and "Introduction to Different Sciences" that you could use either informally or in a group situation at your training station. Be alert to situations in which science concepts can be taught. Keep a record over a two week period of time of the situations in which you were able to help the children learn something about science.

Home Economics
Instructional Materials Center
Lubbock, Texas

ONE WAY
SPEED LIMIT
STOP
DETO
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UNIT X-1

HEALTH AND SAFETY

SUBJECT: Oops, Uh-Oh!

TASKS: Helps to maintain safety of the children during rest and play periods

Practices safety procedures by being alert to situations involving hazards to the safety of children

Assists in administering first aid for minor accidents, cuts and bruises

OBJECTIVES: Be able to (1) describe procedures to follow when an accident occurs that will help to insure the safety of the children
(2) determine safety hazards that need to be corrected
(3) plan activities which will teach safety practices

REFERENCES: Heffernan, H. and Todd, E. *Years Before School.* New York: Macmillan Company, 1965. pp. 188-190; 197-210.

A Guide for First Aid and Emergency Care. Austin, Texas: Texas Department of Public Welfare.

CHILDHOOD ACCIDENTS

Statistics

Accidents lead all other causes of death among children. Motor vehicles and falls account for two-thirds of these accidents. Fifty-two per cent of the accidents involving children occur at school, primarily in unorganized play, either in school buildings, on the playground, or going to and from school.

Causes of Accidents

There are four major causes of accidents:

Carelessness
Unorganized activities
Ignorance
Homes, buildings, and automobiles in poor repair

SAFETY FOR THE CHILD AT THE CHILD CARE CENTER

It has already been mentioned that more children die from accidents each year than from any other cause. Accidents also leave more children crippled than do diseases. And yet the majority of these accidents could have been prevented. Listed below are steps to take to protect the children with whom you work.

WHAT SHALL I DO?

Automobiles

Do not expect a child under three to stay out of the street. Fence his play yard or stay with him every minute.

Always demonstrate the safe way to cross a street.

Teach a child safe practices for riding in a car. Never let a child stand in a moving car or put his head or arms out the window.

Obey traffic laws; drive safely. Never drive over cartons or leaves where children hide. Back cautiously.

Burns and Fire

Keep matches and cigarette lighters away from children

Watch for electric cords and equipment which show wear.

Keep a fire extinguisher handy. Have it checked annually.

Poisons

Keep medicines on a high shelf or in a locked cupboard. Put them away immediately after use. All medication, vitamins, and special diets must be prescribed by a licensed physician and signed, dated, and specified for a particular child.

Teach children never to taste unidentified things the find; berries, roots, fruit, or mushrooms; pills or tablets; liquids left in bottles.

Never store cleaning materials, paint thinner, boric acid solutions, or other poisons in food or beverage containers or in a place accessible to the children.

Furniture, toys, and inside walls should be painted with paints containing no more than 1% lead.

Water

Be aware that a child will seek out interesting water in the neighborhood--the swimming pool, storm sewer, excavation, wading pool, or other water. Know where children are at all times.

Do not leave a child under two alone in the bathroom, even for an instant. Empty wading pools after the day's use. Even two or three inches of water in the bottom is dangerous.

Keep an eye on the child every minute when near water.

SUPERVISE FOR SAFETY

Check equipment to be sure it is safe to use. Be sure that the ladder to the slide is firmly fixed or that boards children may be climbing on are not likely to slip. If you see a loose nail, remove it or pound it in.

Watch children closely when they are using play equipment which may present dangers. Give special attention to the safe use of a swing or a teeter-totter. Show children how a piece of equipment can be used safely. "Walk around the swing," or "Get off the teeter-totter slowly," or "Put the wood in the vise before you start to saw it."

Stand in a position to prevent trouble or possible accidents. Stand close to a group of children who are using the teeter-totter or climbing. If you are helping one child, stand facing the other children so that you can also keep your eyes on them.

When an accident occurs, notify the teacher or nurse. In situations where the child should not be moved, send another child for the teacher.

GOLDEN RULES FOR ACCIDENT PREVENTION

* Try to be aware of potential danger. As you work in the child care center, be conscious of the little things around you that could lead to trouble. Imagine what you might do if you were a child.

* Try to slow down and take extra precations when you are under pressure and things begin to go wrong. Everyday troubles set the stage for accidents. Many occur when people are worried or ill.

* Protect the child; but do not overprotect him to the extent that he is unaware of dangers. Gradually, he must learn to protect himself.

* Do not rely on discipline or warnings to prevent accidents in preschool children. A child's memory is short and he cannot remember an explanation of a danger or realize its meaning. Many accidents occur because parents think they have "taught" very young children about dangers.

* Try to understand the child's needs at each stage of his growth and development. Anticipate, if you can, what he might be able to do next.

* If an accident does occur, do not underestimate the injury. A study of accidents show that less than 50 per cent of the parents were not "very concerned" about the injury at the time it was discovered, regardless of its severity.

* Observe the situation carefully before doing anything. To grab up a child with fractures, hemorrhage or internal injuries and rush to the hospital may compound his injuries.

QUESTIONS:

1. Sally fell while playing on the slide and made a large gash on her forehead. You, the child care aide, know that stitches may be needed to close the wound and these must be obtained within half an hour if the child is to have a reasonable chance of avoiding a scar. What should you do?

2. Mary was running on the wet sidewalk and slipped and fell. After checking to see that she was not seriously hurt, the teacher told the children who were around her to "go play," and then she scolded Mary. What would you have done?

3. What type of behavior is more important on the part of the adult when an accident occurs?

4. Today your duty is to watch the children during their outside play period. You see that Mary is swinging, Jon is digging in the sand with a stick, and Kevin is playing with a ball. Which child is using equipment that is considered a safety hazard? What would you do in this situation?

ASSIGNMENTS:

I. Recall an accident that happened in the child care center. Which of the four major causes of accidents was involved in this incident?

II. Choose any two of the following safety practices and write how you would explain to the children the reason for the practice.

Picking up sticks and tree limbs on playground.
Using tools, such as hammers, safely.
Not running with a stick in the hand.

Not throwing clods on the play ground.
Using blunt pointed scissors.

III. Find or write a story to read to the children which would teach safety. (Examples: How the Fire Chief Helps Us or Smokey the Bear).

IV. Plan a game to play with the children that would teach safety. (Examples: Who are You? Where Do You Live?)

V. Think over your experiences at the center during the last two or three days. What incidents occurred which could have been used to teach the child or children something about safety? (Refer to pages 203-205 of Heffernan and Todd for examples.)

VI. After carefully reading "A Guide for First Aid and Emergency Care," discuss with your employer the first aid you are allowed to give.

UNIT X-2

HEALTH AND SAFETY

SUBJECT: Gesundheit!

TASKS: Observes procedures for reporting signs of illness or discomfort in children

Helps children establish sanitary habits

OBJECTIVES: Be able to (1) describe characteristic symptoms of illness
(2) identify common diseases of children
(3) recognize local and state health policies
(4) plan activities which will promote understanding of sanitary practices

REFERENCES: Required: Leeper, Sarah Lou, Dales, Ruth J., Skipper, Dora Sikes, and Witherspoon, Ralph L. Good Schools for Young Children. New York: The Macmillan Company, 1967. pp.296-309.

Green, Marjorie M. and Elizabeth L. Woods. A Nursery School Handbook for Teachers and Parents. Sierra Madre, California: Sierra Madre Community Nursery School Association, 1966. pp. 32-33.

Supplementary: Summary of Communicable Diseases Common Among Children. Austin, Texas: Texas State Department of Health.

HEALTH POLICIES

Upon arrival at the center, it is necessary for the child to be checked for signs of colds and other infectious diseases. Even though the child care aide does not assume this responsibility, it is important for her to know that inspections are made and the reasons why they are made.

If it is impossible to have a trained nurse admit the children each morning, one teacher trained in child health should be responsible for their admission. This person becomes familiar with the condition of each child's skin, throat, and general appearance and will be able to notice any change from normal condition. Even though the child appears well in the morning, the child care aide should report to her supervisor any unusual incidents occurring later in the day that indicate the child is not feeling well, such as signs of fatigue, emotional upset, and lack of interest in activities or food.

The health policies for the center are generally established by a local medical doctor. The health program should be consistent with state laws, keeping in mind that the primary objective is the child's well-being.

Typical health policies for child care centers include:

1. A complete physical examination prior to a child's entrance in the nursery school or kindergarten or other child care center.
2. The following immunizations: smallpox, diptheria, whooping cough, tetanus, polio, measles, and mumps.
3. Keeping a child home any day when he:
    a. Is in the first three days of a cold
    b. Has an elevation of temperature
    c. Has an unidentified rash
    d. Has had an upset stomach within the last 24 hours
    e. Has a sore throat or discharges from the eyes or ears
    f. Is in the incubation period of a contagious disease
    g. Shows deviation from usual behavior or appetite
4. A person designated to be available for observing and inspecting each child daily. This person will talk to the parent about any questionable sign or symptom of illness and about any accidents which have been reported during the day.
5. Records of the child's health containing such information as allergies to food, pollen, and dust and the reactions which may occur in the form of a rash, scales, hives.
6. Administering of first aid treatment of a minor nature only. Parents will be informed when treatment of a more serious nature is required.

The directors of the child care center in which one is employed may adopt additional policies which they feel are necessary to provide for the welfare of each child. Although the child care aide is not solely responsible for carrying out these policies, a knowledge of minimum standards is essential. She will be required to help enforce the center standards for health and safety.

For additional and specific regulations governing day care centers in Texas, consult "Minimum Standards for Day Care Centers" (Texas Department of Public Welfare, free).

EARLY SYMPTOMS OF ILLNESS[1]

It important that all members of the staff understand the methods of determining whether or not a child is beginning to get sick. This sounds like an unreasonable order until it is reduced to very simple terms...any child who does not appear to be completely well should be considered sick until proven otherwise.

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[1] "Texas Day Care Newsletter." Austin, Texas: Department of Public Welfare, Child Welfare Division. Issue No. 8, March-April, 1965. pp. 4-5.

What makes us suspect that a child is not completely well? What does one look for when one thinks a child might be "coming down" with something? Obvious illnesses frequently are preceded by one or more signals which can be detected if one is reasonably observant. Mothers can watch for these signals as they help their preschool children with dressing and eating. Day care staff can make a quick inspection of each child as he arrives every morning. With practice, one can look for several of these signals at one time, thus, developing a simple inspection that takes only one or two minutes per child. What are these signals? What do we look for in these brief, daily health inspections?

Are the child's eyeballs bloodshot, yellowed, watery, or glassy?

Are his eyelids red or swollen?

Is there any discharge from his eyes or nose?

Does he cough, sneeze, or wheeze?

Does he breathe noisily or with effort?

Is his throat red or swollen?

Are there spots in his mouth or throat?
(Tongue depressors are not necessary if he is shown how to "open wide" and stick out his tongue.)

Are the lymph glands in the neck swollen or tender?
Using fingers pressed gently against the neck, these glands can be found in three places on each side of the neck. To find the first place, imagine a line from the "Adam's apple" to the ear lobe. About at the halfway point, the line will cross an artery with a pulse beat. Feel for kernels slightly above and back of the pulse. To find the second place, imagine a line from the ear straight down the side of the neck. Feel for lumps from the middle of this line to the base of the neck. When feeling for swollen glands, be sure to press gently, with the flattened, under-sides of the fingers. The third place can be found by gently gliding the fingers along the under side of the jaw bone, pulling them from the area of the big teeth toward the chin. As all three of these glands occur in pairs, use both hands and check both sides of the neck at the same time.

Is his face flushed, pale, or hot?

Are there any changes in the appearance of his skin?

Look between his fingers, at his palms, at the under side of the wrists, at the inside of his elbows, at his face, especially around the hairline and around and below his collar, particularly the upper chest.

Does he "act like himself?"

Has he lost his bounce? Is he unexplainably quiet, irritable, or tired? Has he lost interest in toys, activities, or his friends? If he is usually independent and eager to play, does he cling to the person who brought him?

Has he lost his appetite for no apparent reason?

Your role as a child care aide is to be alert to these symptoms, but do not be guilty of making a diagnosis or treating the child in any way. Symptoms should be reported to the teacher who will contact the nurse or a doctor and the child's parents. The doctor is the one to do the diagnosing and treating.

Occasionally the children may be immunized as a group at the child care center. A calm, reassuring attitude on your part will help to keep the children calm. Do not tell a child, "Don't be afraid." This will not remove his fear and may even suggest to him that he should be afraid. Having some object available to amuse him as he is being injected may help to draw his attention away from the needle.

The following charts give the basic information on the causes, communicability, prevention, and control of common childhood diseases.

COMMUNICABLE DISEASES OF CHILDHOOD*

	Chickenpox	Diptheria	Smallpox	Tetanus	Whooping Cough
CAUSE	A virus: Present in secretions from nose, throat, mouth of infected people.	Diphtheria bacillus: Present in secretions from nose, throat and skin of infected people and carriers.	A virus: Present in skin pocks and discharges from mouth, nose, throat, bowels, bladder of infected people.	Tetanus bacillus: Present in a wound so infected.	Pertussis bacillus: Present in secretions from mouth and nose of infected people.
HOW SPREAD	Contact with infected people or articles used by them. Very contagious.	Contact with infected people and carriers or articles used by them.	Contact with infected people or articles used by them.	Through soil, street dust or articles contaminated with the bacillus.	Contact with infected people and articles used by them.
INCUBATION PERIOD (from date of exposure to first signs)	13 to 17 days. Sometimes 3 weeks.	2 to 6 days. Sometimes longer.	From 7 to 16 (usually 12) days.	4 days to 3 weeks. Sometimes longer. Average about 10 days.	From 7 to 10 days.
PERIOD OF COMMUNICABILITY (time when disease is contagious)	From about 1 day before, to 6 days after first appearance of skin blisters.	From about 2 to 4 weeks after onset of disease.	From 1 to 2 days prior to first symptoms, to disappearance of pocks.	Not communicable from person to person.	From onset of first symptoms to about 4th week of the disease.
MOST SUSCEPTIBLE AGES	Under 15 years.	Under 15 years.	All ages.	All ages.	Under 7 years.
SEASONS OF PREVALENCE	Winter.	Fall, winter and spring.	Winter.	All seasons, but more common in warm weather.	Late winter and early spring.
PREVENTION	No prevention.	Inoculation with diphtheria toxoid (in triple vaccine for babies).	Vaccination.	Inoculation with tetanus toxoid (in triple vaccine for babies).	Inoculation with whooping cough vaccine (in triple vaccine for babies).
CONTROL	Exclusion from school for 1 week after eruption appears. Avoid contact with susceptibles. Cut child's fingernails short and keep clean. Immunity usual after one attack.	Antitoxin and antibiotics used in treatment and for protection after exposure. One attack does not necessarily give immunity.	Isolation until all crusts are gone. Immunity usual after one attack.	Booster dose of tetanus toxoid for protection after a wound. Antitoxin used in treatment and for temporary protection for child not immunized. One attack does not give immunity.	Pertussis immune globulin can lighten attack or give protection after exposure in infants under 2 years. Isolation from susceptible children for about 3 weeks from onset of spasmodic cough. Immunity usual after one attack.

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* Based on The Control of Communicable Diseases, American Public Health Association, 1965; and Report of Committee on Control of Infectious Diseases, American Academy of Pediatrics, 1966.

COMMUNICABLE DISEASES OF CHILDHOOD (Continued)

	German Measels	Measels	Infantile Paralysis
CAUSE	A virus: Present in secretions from nose and mouth of infected people.	A virus: Present in secretions from nose and throat of infected people.	3 strains of polio virus have been identified: Present in discharges from nose, throat, bowels of infected people.
HOW SPREAD	Contact with infected people or articles used by them. Very contagious.	Contact with infected people or articles used by them. Very contagious.	Contact with infected people.
INCUBATION PERIOD (from date of exposure to first signs)	14 to 21 (usually 18) days.	About 10 to 14 days.	About 7 to 21 days.
PERIOD OF COMMUNICABILITY (time when disease is contagious)	From 7 days before to 4 days after onset of symptoms.	From 4 days before until 5 days after rash appears.	Apparently greatest in late incubation and first few days of acute illness.
MOST SUSCEPTIBLE AGES	Young children. Fairly frequent in young adults.	Common at any age during childhood.	Most common in children 1 to 16 years; prevalent in pre-school age group.
SEASONS OF PREVALENCE	Spring and winter.	Mainly spring. Also fall and winter.	June through September.
PREVENTION	No prevention.	Measles vaccine.	Polio vaccine.
CONTROL	Isolation, when necessary, for 5 days after onset. No attempt should be made to protect young girls from this disease. No control. Immunity usual after one attack.	Isolation until 7 days after appearance of rash. Gamma globulin between 3 and 6 days after exposure. Antibiotics for treatment of complications. Immunity usual after one attack.	Isolation (differs by State law) for about one week from onset, for duration of fever. Immunity to infecting strain of virus usual after one attack

COMMUNICABLE DISEASES OF CHILDHOOD (Continued)

	Mumps	Strep Infections	Rheumatic Fever
CAUSE	A virus: Present in saliva of infected people.	Streptococci of several strains cause scarlet fever and "strep" sore throats: Present in secretions from mouth, nose, ears of infected people and carriers.	Direct cause unknown. Precipitated by "strep" infection.
HOW SPREAD	Contact with infected people or articles used by them.	Contact with infected people, carriers and articles used by them. Also from contaminated milk and other food.	Unknown. But the preceding "strep" infection is contagious.
INCUBATION PERIOD (from date of exposure to first signs)	12 to 26 (commonly 18) days.	1 to 3 days.	Symptoms appear about 2 to 3 weeks after a "strep" infection.
PERIOD OF COMMUNICABILITY (time when disease is contagious)	From about 7 days before symptoms to 9 days after. Principally at about time swelling starts.	During period of incubation and illness (about 10 days).	Not communicable. Preceding "strep" infection is communicable.
MOST SUSCEPTIBLE AGES	Children and young people.	All ages.	All ages. Most common from 6 to 12 years.
SEASONS OF PREVALENCE	Winter and spring.	Late winter and spring.	Mainly winter and spring.
PREVENTION	No prevention.	No prevention.	No prevention, except proper treatment of "strep" infections.
CONTROL	Isolation until swelling subsides. No attempt should be made to protect boys from this disease before they reach puberty. Immunity usual after one attack but second attacks can occur.	Isolation until recovery. Use of antibiotics. One attack does not necessarily give immunity.	Use of Antibiotics. One attack does not give immunity.

It is important that children receive the following immunizations before they enter the child care center. This will help to protect the health of both the child and the children with whom he comes in contact.

IMMUNIZATION

Disease	Age for First Dose	Number of Doses	Boosters
D-P-T (Diphtheria, Whooping Cough, Tetanus)	6 weeks to 2 months	3 shots one month apart	At 1 year and again at 4 years; repeat as recommended by physician
Polio	6 weeks to 3 months	SALK: 3 shots, six weeks apart. 4th after six months or longer	Every 2 years, as recommended by physician
		SABINE: 3 oral doses, 4 to 6 weeks apart	At about 1 year, as recommended by physician
Smallpox	15-18 months	1 vaccination	Every 3 to 5 years and if exposed
Measles	12 months	"LIVE" TYPE: 1 shot (or) "KILLED" TYPE: 3 shots, one month apart	As recommended by physician

HEALTH RULES

1. Keep young children away from sick people because--

   Germs which sick people (or well people who are "carriers") spray into the air with a cough or sneeze are inhaled by others as they breathe.

2. Teach youngsters to wash hands regularly, especially after using the toilet and before meals because--

   Some diseases are spread directly from the skin of one person to another and germs can invade the body from hand to mouth as we eat.

3. Be sure that the water the children drink and the foods they eat are safe because--

   Some diseases come from contaminated food and polluted water.

4. Cooperate with local and state health agencies on community health measures because--

   Public health measures (such as immunizations) are designed to protect the health and safety of everyone in the community, just as those in the center are designed to protect the health and safety of the children and staff.

SANITATION TIPS

Sanitation means many things--clean water, clean food, proper storage, suitable and clean equipment, and good food-handling practices by personnel.

All centers should comply with local health regulations to insure sanitation and protection from disease and injury.

Water Supply

A supply of wholesome drinking water should be available to the children during the day, as well as an abundant supply of water for hand washing, dish washing, and other cleaning purposes. The water supply should comply with local health department regulations.

Food Sanitation

Examine food when it is delivered to make sure it is not spoiled or unclean and that no insects are present.

Store food at proper temperatures at all times.

Keep perishable food either refrigerated or hot. Some foods, such as custards made from milk and eggs, spoil quickly and may cause illness if not handled properly.

Protect food from insects and rodents by storing in tight containers. Label all containers.

Use oldest supplies first.

Clean up spilled food immediately.

Check food supplies before using--when in doubt . . . throw out!

Throw out portions of food served but not eaten.

Provide for garbage or trash disposal in compliance with local regulating authorities.

Keep garbage containers clean and tightly covered.

Equipment Sanitation

Keep equipment, dishes, utensils, floors, and walls clean and in good repair.

Have good light and ventilation in food preparation area.

Avoid the use of cracked or chipped utensils and dishes. (Enamelware chips easily.)

Use only dishwashing equipment that meets local health agency regulations.

Personnel Sanitation

All personnel should be free of contagious diseases and shall have a health examination from a reputable physician. Kitchen personnel must have the permit which is required by the state or local health authorities.

Protect food from coughs and sneezes.

Wear hair nets or head covering when handling food.

Do not handle food when suffering from a cold or when there are cuts and sores on the hands.

Use appropriate utensils when handling food. Avoid use of fingers.

Storage of Poison and Toxic Materials

All toxic and poisonous materials and compounds, such as insecticides, rodenticides, polishes, bleaches, and petroleum products, should be kept in sealed containers in a locked cabinet in a room away from all food products. These should always be labeled. They should never be put in a container (can or bottle) in which food was originally stored.

QUESTIONS:

1. Tommy's parents had kept him at home for two days because he was unusually irritable and had a slight fever. Being confined at home while Tommy was sick was wearing on the mother. She sent him back to school, even though he still had a slight fever. Why did the nurse send Tommy home?

2. After eating some delicious strawberries, Jane developed a rash. What would you do?

3. Don was in such a hurry to eat, that he rushed to the table to eat, without washing his hands after toileting. Suggest ways you might handle this situation to help him develop proper habits.

4. Jody's parents brought her to the child care center without a smallpox vaccination. How should this situation be handled? By whom?

Multiple Choice:

5. Upon arrival at the center each morning the child is
    a. given toys to start playing.
    b. checked by designated person to detect signs of illness.
    c. served juice and crackers.

6. If a child has a cold when he is brought to the center, he should be returned home for
    a. 1 day.
    b. 5 to 6 days.
    c. at least 3 days.

7. Children should be taught to wash hands often during the day because
    a. germs are transferred from hands to mouth.
    b. you want them to look neat and clean.
    c. water is soothing and would act to calm the child.

8. Illnesses in small children are frequently preceded by
   a. an unusually active appetite.
   b. longer naps than usual.
   c. discharge from nose and eyes.

9. Food should be stored after opening
   a. in original box on shelf.
   b. in closed, tight, container.
   c. in refrigerator.

10. Children will learn more about health and safety when
    a. they are involved in situations concerning health and safety and are allowed to practice what they have learned.
    b. the teacher employs health and safety practices without involving the children.
    c. the teacher tells the children stories concerning health and safety practices.

11. Check the statements in the following list which should cause a nursery or kindergarten teacher or aide to try to improve her self-concept.
    _____a. "I enjoy working with children."
    _____b. "I am tired all the time."
    _____c. "I have a feeling of accomplishment at the end of the day."
    _____d. "Teaching is a job."
    _____e. "I can show kindness and affection easily."
    _____f. "I get excited when 'accidents' happen at school."

12. List one advantage and one disadvantage of using cots for rest periods.

ASSIGNMENTS:

I. Write a story, plan a skit, or find a story to read to the children which will help them to develop a good attitude toward medical personnel.

II. Carefully read the material adapted from Leeper's Better Health for Florida's Children on pages 304-309.

   a. Select two experiences or activities from five of the eight areas (a total of 10) and write a brief description of something similar that you have observed in your center. Discuss the possible outcome for the child of the experience you observed.

   b. Select two or three of these activities which you have not observed in your center and plan how you might include these as you work with the children.

UNIT XI-1

INFANT CARE

SUBJECT: What Am I Like?

OBJECTIVES: Be able to (1) describe physical, social, intellectual, and emotional characteristics of infants
(2) describe procedures for guiding behavior of infants

REFERENCE: Brisbane, Holly. The Developing Child. Peoria, Illinois: Charles A. Bennett Company, Inc., 1965. pp. 63-64; 84-91; 129-148; 152-160.

The newborn infant will have little control over his movements. His muscles are soft and his nervous system is undeveloped. He flails his arms, wiggles, and kicks. He cannot turn his body, sit up, reach for an object or even coordinate his eyes. When he looks at you, one eye may seem to be looking in one direction and the other eye in another direction. This means he does not see clearly or directly. The first set of muscles over which the body gains control are those of his eyes. During the first three months of life, he develops the ability to focus his eyes and follow one object; in short, he learns to look.

An infant's body moves all over when he moves even one part of his body because his nervous system is undeveloped. This results in constant activity and consumes a great deal of energy. For example, when an infant sucks his thumbs, he kicks his legs, waves his arms, and twists and turns his body.

Most child care aides know that infants are helpless, and they are prepared to wait on them hand and foot. What many do not realize is that within a few weeks the child's nervous system develops, his bones harden, and his muscles strengthen. As he grows and develops, he should be given every possible opportunity to learn to do things for himself.

After three-and-one-half to four months, the baby is able to clasp his hands together while lying on his back. With his hands he explores, grasps, and touches as his skills increase. By the time he is six to seven months old, he has gained control over his head muscles and can move his eyes well enough to pick up a toy and bang it and pass it from one hand to another. He can easily get his thumb in his own mouth, reach his toes and all other parts of his own body, and hold tightly to something he wants. He also can (1) roll over from back to front and back again and (2) keep his trunk and head erect when placed in a standing position. He learns to creep on his hands and knees when about nine months old and, at this time, begins to pull himself into a standing position. By the end of the first year, most babies can creep rapidly about their environment.

After having walked with support, most babies learn to walk independently at the end of the first year or shortly thereafter. During this time the infant has developed precision in his arm and hand movements and can pick up tiny objects, such as crumbs and bits of fuzz. He uses his forefingers to poke into things and a bit later to point for what he wants. His control over trunk, arms, and hands permits him to reach, grasp, pluck, poke, throw, and hit. Coordination of hand and eye is better by this time.

By his first birthday, the infant wakes, sleeps, and eats in a definite pattern. Now he takes one long nap and one or two short naps. His meals are reduced from six or more to three. He still may suck, but he has learned to chew. He may have four to six teeth.

The infant recognizes his father and mother and other family members. He also distinguishes between family members and strangers and somehow makes a decision about whether or not he can trust them. He likes people better than toys, and he likes to play little games like peek-a-boo and patty-cake. He can, however, spend hours alone with his playthings. His interest in toys and in play is rooted in his relationships to people, but develops its own characteristics and functions. The child's play not only provides him with experiences of pleasure, but it also provides a way of solving problems through activity and fantasy. It is one of the ways he communicates with others.

Through the first year, the infant knows when others are not pleased with him. He can tell how the people around him feel; if they are anxious, afraid, angry, affectionate, or upset, he catches the mood from them.

During the first year, babies begin to decide whether or not the world is a safe and dependable place. For most babies, the answers are loud and clear...the world is a wonderful place. They have developed a deep attachment or fondness for people who take care of them. Through this attachment, they become human beings who can in turn care for others.

QUESTIONS:

1. Which of a baby's senses are least developed at birth?
2. How will loud noises effect a baby?
3. Which of the following is true about development of infants?
   a. They are all able to do the same things at the same age.
   b. They all do the same things in the same sequence, but at various ages.
   c. They do not all follow the same sequence in their stages of development.

4. At what ages would a child probably experience the following emotions?
    a. Laughs aloud in response to facial expressions
    b. Reacts shyly to a new face
    c. Conveys pleasure with his entire body and shrieks with delight
    d. Is capable of initiating affection

5. In what four ways may a frightened infant react?

6. What type of situations arouse anger in an infant?

7. When a child is told "no," but adults in the situation laugh or smile, what is he likely to do in a second similar situation? Why?

8. What does Brisbane believe is the chief factor in determining the kind of person a baby is going to be?

9. Give at least three suggestions for working with a sensitive child.

10. What is an important consideration in guiding an aggressive child in his first year?

11. What three emotions can be recognized in infants at three months? In six months? In one year?

12. The infants assigned to Mary are about four months old. Which of these behaviors related to social development should she expect of them?
    a. Like to look at self in mirror
    b. Smile back at someone
    c. Prefer familiar faces
    d. Repeatedly throw objects on floor for someone to pick up
    e. Like to be held upright

13. What are a baby's two main tools for learning?

ASSIGNMENT:

Refer to the list of behaviors listed on pp. 156-157 in Brisbane, The Developing Child. Observe the infants with whom you work and list the motor activities they can accomplish.

Home Economics
Instructional Materials Center
Lubbock, Texas

UNIT XI-2

SUBJECT: Where's That Bottle?

TASK: Feeds infant as directed by parents and supervisor

OBJECTIVES: Be able to (1) relate effect of behavior of adult to attitudes of infant toward feeding
(2) describe procedures for feeding an infant liquid and solid foods
(3) recognize stages of development in learning to eat

REFERENCES: Brisbane, Holly E. The Developing Child. Peoria, Illinois: Charles A. Bennett Company, Inc., 1965. pp. 101-113.

U.S. Department of Health, Education, and Welfare. Infant Care. Washington, D.C.: U.S. Government Printing Office, 1966. pp. 35-38.

One of the responsibilities which may be assigned to a child care aide who works with infants is to feed the infant on the schedule set up by his mother. If a baby is to thrive he must get an adequate supply of milk. During the early weeks of a baby's life, a flexible schedule is advised because it takes time for a baby to learn to be hungry at specified times. A schedule that suits the needs of one baby may fall far short of meeting the needs of other babies. As a result a more permissive attitude toward the schedule of feeding has developed in recent years. Because schedules may vary from one infant to another, it is especially important to follow the feeding schedule provided by the parents.

One way to help an infant adjust to a scheduled feeding time is to make few exceptions in his schedule. If he is asleep at his regular feeding time, he should be awakened and fed. When he wakes up early and frets or cries, it does not always mean that he is hungry. If, however, he makes sucking movements or bites his hand this is a clue that he is hungry. In this case, a drink of water will sometimes satisfy him until his regular eating time. If he continually wakes up early and seems to be hungry, this may mean he needs to be fed at shorter intervals.

Typical feeding schedules for infants are:

Birth to one month--Every three hours during the day and every four hours at night

One to six months--Every four hours, except that the 2:00 a.m. feeding is omitted.

After six months--Every five hours, except that the 10:00 p.m. feeding is omitted. Snacks of juice and zwiebach may be given between feedings.

Because he not only needs the food, but also some cuddling, some nurseries recommend that the baby be held while he is being fed. This body contact is almost as important as the food. It helps the baby feel safe and content. The baby forms some of his first ideas about his world and about other people from experiences at feeding time. The manner in which the infant is fed is, therefore, most important. If you are responsible for feeding infants, discuss the policies about feeding with you supervisor.

After a baby has been fed, and sometimes during the feeding, he will need to be "bubbled" or "burped" by holding him over your shoulder and patting him gently to bring up any air bubbles which may have formed. If the baby swallows air during his feeding and is not "burped," he is likely to have pains in his stomach after the feeding. Infants under three months should never be put down until they have "burped." After that age, the infant will begin to be able to help the the "bubbling" and by five or six months can do it without help.

If one of your tasks is to make the formula, it is important to remember to carefully follow directions given by the parent or supervisor. Not all doctors recommend that the baby formula be warmed; some find that babies thrive better on formula taken right from the refrigerator. Because there is still much debate about this matter, you, as a child care aide, should be careful to follow instructions given by the parents.

In addition to milk, an infant is usually given Vitamin D. He may also have strained orange juice beginning with the first month. By the time he is three or four months old, he will be eating some solid foods, such as cereal, strained fruit, and egg yolk. Pureed vegetables and meat will gradually be added to his diet.

Babies will like some foods more than others. Some babies will eat better if they are given the solid foods first, while others like some milk first and then the solid food. Try to find out from the parents which pattern is preferred by the infants you feed.

For the first four or five months of life the child sucks food into the mouth and swallows without chewing. This is the reason all the foods he eats must be in liquid form. Because he needs to learn to chew and bite, it is recommended that junior foods be added to his diet at least by the time he is nine months old. If he stays on liquid food too long, it will be harder for him to learn to bite and chew when solid foods are introduced in his diet.

By the time an infant is about four or five months old, he will begin to bite. The lesson he has to learn in relation to biting is how much he can handle in one bite. About a month later, the infant begins to chew. This presents more of a problem, however, and until he learns how he may either spit out the food or hold it in his mouth. If the child shows a tendency to chew on the front teeth, putting a larger amount of food in the mouth will help him learn to use his gums as well as his teeth for chewing.

The next step in the eating process is to learn how to swallow solid foods. Although swallowing liquids is a natural reflex, swallowing solids is something the infant must learn. It sometimes helps a baby to learn to swallow if his head is tilted back slightly. This causes food to rest on his throat and stimulates the muscles in the throat. A swallow of milk may also help the baby to swallow the food. This procedure should not, however, be practiced for very long, or the child may grow to depend on it instead of learning to swallow.

One of the problems that occurs when an infant begins to drink from a cup is that he is likely to take in air. If he takes in excessive amounts, he may choke or even vomit. He is more likely to take in air when he is hungry. It is recommended, therefore, that when he is first learning to drink from a cup it should be offered at the end of his feeding period when he is not so hungry. The transition from bottle to cup needs to be a gradual one.

The baby learns to bite, chew, and swallow gradually. He needs time to learn one skill before the next one is introduced. For example, he should not be expected to be able to chew before he has mastered biting or swallowing. By the time he is a year old, he will be able to perform these procedures if he has had an opportunity to practice them.

Clues that the infant is ready to start feeding himself are that he tries to hold his bottle and wants to carry his spoon to his mouth. Patience is required while a child is learning to feed himself because he will make many mistakes and make a mess of himself and his surroundings. Protect his clothing with a bib and try to relax. The only way he will learn is through practice so be willing to put up with his mess. Before long, he will surprise you with what he has learned.

QUESTIONS:

1. Why is it important that a baby be held during feeding?
2. Why is it important that babies be bubbled or burped?
3. Why is it more important to bubble a young baby than one over three months old?
4. What can be done to help an infant adjust to a regular feeding schedule?
5. What can be done to help a child learn to swallow solid foods?

6. When an infant is learning to chew, what two things might he do?

7. What conclusion would you reach if an infant spit out a new food you were introducing in his diet?

8. What consistency should new foods be when they are first given to an infant?

9. Why is it recommended that orange juice not be heated before giving it to an infant?

10. According to Brisbane, what are three indications that an infant's feedings are adequate?

11. At about what age will a baby be ready for a three-meal-a-day schedule?

12. When bottle feeding a baby, how much milk should be kept in the nipple? Why?

13. What attitude on the part of an adult is especially important when the baby starts feeding himself?

14. At about what age will a baby start to try to feed himself?

15. Jill was assigned to feed a baby whose diet included vegetables and meat. She was not sure about what to do and was afraid the baby would not like it. What effect might this have on the baby.

UNIT XI-3

SUBJECT:	What's Wrong?
TASK:	Checks infants when they cry and determines reason for crying
OBJECTIVES:	Be able to (1) interpret different kinds of crying (2) describe procedures to follow when infants cry
REFERENCE:	Brisbane, Holly E. The Developing Child. Peoria, Illinois: Charles A. Bennett Company, Inc., 1965. pp.68-70.

The baby enters the world with a cry. The first breath a baby takes is in the form of a cry. This takes air into the lungs and starts the breathing process as soon as he comes into the world.

Crying is one of the earliest patterns of emotions to appear and one of the easiest to identify. When a baby starts to cry some of the questions that come to mind are: Is he wet? Is he hungry? Does he have the colic? Does he have indigestion? Is a pin sticking him? Is he tired? Is he spoiled?

The main difference in a newborn baby's cries usually is in volume, i.e., some are louder than others. This makes it difficult to determine, except by trial and error, why the baby is crying. By the time the infant is two or three months old, however, the way the baby cries for different reasons begins to change. It then becomes easier to recognize the reason for his crying.

Even though the tonal qualities of different babies' cries vary, they are enough alike that one who works with infants over a period of time can usually begin to tell which cries mean hunger, pain, or discomfort. Some clues are given in the following paragraphs.

Is he hungry? Is the cry an angry howl accompanied by sucking movements? This is one sign of hunger. If the infant is on a regular feeding schedule and starts crying around feeding time, he is probably trying to indicate that he is hungry.

A rule of thumb that is sometimes followed is that if a baby cries hard for fifteen minutes or more and if it is more than two hours after the last feeding or even if it is less than two hours after a very small feeding, he should be fed again. If this stops the crying and he is content after the feeding, the cry was interpreted correctly.

Is the baby ill? Intestinal infections and colds are prevalent during the early months of a baby's life. If the baby's cries are low-pitched moans and he appears feverish, report this to your supervisor.

Is the baby wet or has he soiled his diaper? Most infants do not seem to mind being wet for a short time, but eventually they may express discomfort by piercing screams, or short, sharp piercing cries.

Does he have indigestion or colic? Try bubbling or burping him. If this does not help, and he has any of these symptoms--fretting, passing gas by rectum, spitting, and vomiting, or bowel movements that are partly loose and somewhat green in color--this condition should be reported to the supervisor. The cry may be a piercing scream; a high-pitched shrill wail with whimpering and groaning; or a short, sharp cry accompanied by a dilated abdomen and legs pulled up and stiff.

If he fatigued? When a baby moans in a low pitched manner, yawns, and sighs, you assume he is sleepy. If babies have been stimulated or excited or have been awake for an unusually long time, they may not be able to drift off to sleep peacefully. Sometimes they may cry frantically and loudly, and then suddenly fall asleep. It is not necessary to attend to these cries unless they persist over a long period of time. Ordinarily the infant will eventually fall asleep. Rushing in to see what is wrong will only delay his falling asleep.

Is he spoiled? Around the sixth month the baby's interest in people develops to the point that he wants constant attention. He soon learn that crying is a quick and easy way of satisfying his longing because when he cries someone usually comes to see what is the matter. He then shows his gratitude by an immediate cessation of crying and a happy smile. This type of crying is not a form of language indicating a need for attention to some bodily condition, but rather a bid for attention. When his cries are angry howls ending abruptly at the sight of a person, it is often called "spoiled" crying and does not indicate that anthing is wrong physically. They will often cry briefly and then settly down on their own if left alone.

As a child care aide, it is important that you respond to the babies' cries. Studies indicate that babies whose cries are heeded promptly cry much less than babies whose cries are ignored. Sometimes a soft voice or reassuring pat will stop the crying. Even though babies need companionship as well as food and care, they should not be picked up every time they cry. Try to interpret the cry and then react accordingly. As the infant develops, he begins to communicate by means other than crying. Babies have their own individual expressions or actions but there is enough similarity in those used by different babies that it is relatively easy to tell what they mean.

Following is a list of common actions of babies and their meanings:

BEHAVIOR	REASON
Trembles, wiggles and squirms	Cold
Smacks lips or sticks out tongue	Hungry
Sneezes several times	Wet and cold
Allows food to run out of the mouth	No longer hungry
Holds out arms and smiles	Wants attention and to be picked up
Reaches for object	Wants someone to hand him an object
Pushes away from object	Does not want it any longer
Pouts	Unhappy or angry
Wiggles and cries during dressing or bathing	Does not like to have movements restricted

QUESTIONS:

1. What is the main method of communication used by a baby?

2. Julia's cries are piercing screams. What might be the reason for her crying?

3. How can "spoiled" crying be recognized?

4. What kind of cry would indicate that a baby is tired?

What do the types of behavior in questions 5-7 usually indicate about an infant?

5. Sneezes several times
6. Allows food to run out of his mouth
7. Smacks lips

8. One of the babies Gail was caring for had been awake longer than usual and it was time for his nap. When Gail put him down and left the room, he started crying. What should Gail do?

9. Sally was tired and cross one afternoon when she went to her training station. Her job was to feed and change the babies. What effect may the way she feels have on the babies?

10. One of the infants Betty cares for wants to be fed immediately after he wakes up and cries if there is a delay. Another infant plays quietly in her crib until she is fed. Is something wrong with the first baby? How would you explain this difference?

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Lubbock, Texas

UNIT XI-4

SUBJECT: Oh, No, Not Again!

TASK: Changes diapers and other clothing when necessary

OBJECTIVE: Be able to describe the procedure for changing diapers

REFERENCE: Brisbane, Holly E. The Developing Child. Peoria, Illinois: Charles A. Bennett Company, Inc., 1965. pp. 96-98.

The most important single item of clothing for a young baby is the diaper. Diapers are available in different materials and different sizes. The largest size, twenty by forty inches, is the one most frequently used. Some of the materials from which diapers are made are gauze, bird's-eye, and flannel. Bird's-eye is more absorbent than gauze and is less bulky than cotton flannel. Gauze dries quickly, but is less absorbent than the other materials. For travel and emergency use, disposable diapers are excellent.

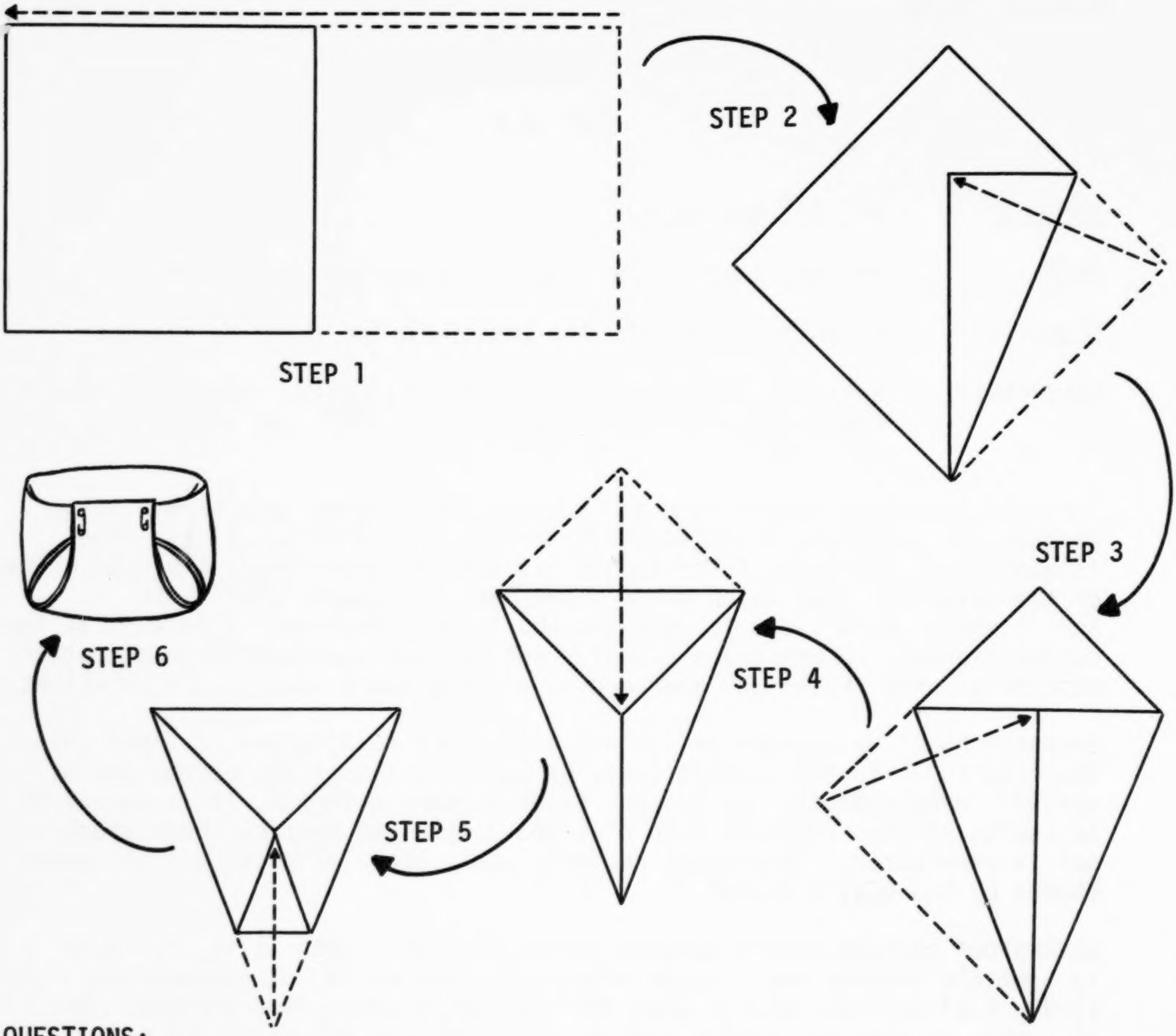
Diapers should be changed before and after each feeding and at times when the baby is obviously uncomfortable because his diaper has become wet or soiled. When changing the diaper, after a bowel movement, it is important to sponge off the buttocks with a clean, damp cloth that has been wrung out in warm water. To prevent chafing, apply baby lotion or oil as recommended by the baby's doctor.

Waterproof panties should be worn by the baby only when it is important to keep his clothes dry. Nylon or plastic panties do not produce the steamy feeling that results when the baby wears rubberized panties. Use of rubber or plastic panties over a period of time may cause the baby's skin to become chapped and irritable because of the retention of moisture and heat.

Soiled diapers should be rinsed in the toilet and put into a plastic bag before being returned to the diaper bag (equipment bag) provided by the baby's parent.

There are many ways to diaper a baby. One way to fold a diaper, in addition to the one described in the reference, is shown in the illustrations on page A-186.

STEPS IN FOLDING A DIAPER



QUESTIONS:

1. What is the most important item of clothing for a young baby?
2. When should waterproof panties be worn by the baby?
3. How should soiled diapers be cared for at the nursery school?
4. Where should the extra thickness of a diaper be placed for a boy? a girl?
5. Approximately how many changes a day do babies need?
6. What precaution can be taken to prevent sticking the baby when pinning the diaper?

UNIT XI-5

INFANT CARE

SUBJECT: What's That Thing Up There?

TASK: Supervises play period

OBJECTIVES: Be able to (1) recognize play activities typical of infants at different ages
(2) describe the role of play in infant's development
(3) evaluate suitability of toys for infants

REFERENCES: Brisbane, Holly E. The Developing Child. Peoria, Illinois: Charles A. Bennett Company, Inc., 1965. pp. 160-162.

U.S. Department of Health, Education, and Welfare. Infant Care. Washington, D.C.: U.S. Government Printing Office, 1966. pp. 40-42.

One may not associate play with infants, but play contributes to an infant's development during his first year. The first toys are usually rattles, cradle gyms, and mobiles which are suspended over the baby's bed for the infant to look at and later for him to reach. Mobiles and cradle gyms help the infant learn to focus his eyes and enrich his environment. His intellectual development is stimulated when he has something more than the ceiling to observe. Changing the sizes, shapes, and colors of objects on the mobile adds to his perception of his world.

Play with his own body and other toys, as well as social play with adults, begins to develop during the first year. At about two months of age, the infant discovers his hands and by the time he is about four months old, he begins to use his fingers. His feet are one of his next discoveries. During the first six months, he gradually develops the ability to reach out to grasp a toy; put it in his mouth; and bang, inspect, and use it with increasing skill. In the second six months, he is able to handle more than one toy at a time and to combine them in various ways. He can put a small object inside a box and can bang two toys together. He also develops the ability to remember a toy long enough to find it when it is out of sight, and he may also develop a strong preference for some toys over others.

His play with the adult goes through different stages. Beginning in the early months with smiling and cooing to the adult, he later makes contact with another person by smiling, vocalizing, or reaching out to touch or tug. By eight to nine months, he plays such social games as peek-a-boo and bye-bye with great enjoyment. As he continues to develop, he learns to repeat actions or behavior to which adults responded favorably. His laughter, his many sounds, and his first words are ways in which he relates to others in a playful manner. Play, both with toys and with people, is necessary for the child to develop to his fullest potential.

QUESTIONS:

In questions 1-4 identify the age at which this play activity is likely to occur. Then give at least two toys which would be suitable for that age and activity.

1. Likes to pound, bang, throw and shake things
2. Wants things to watch
3. Starts to creep after objects
4. Begins to grasp and manipulate things

5. According to Brisbane, in what five ways does play contribute to a child's development?

6. Playing with sounds is the basis for learning to ________________,
playing with people is the basis for __________________________,
and playing with things helps the baby _________________________.

ASSIGNMENTS:

I. Using the list on p. 41 in Infant Care, evaluate at least thee of the toys available to infants at your training station.

II. Have you put into practice any of the ways listed in Brisbane, The Developing Child, p. 163 that a baby can be allowed to "help"? If so, explain. If not, select one to try.

III. Make a mobile to use on a baby's crib at your training station.

IV. Select one infant at your training station and describe his "play" over a three-day period.

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Lubbock, Texas

UNIT XI-6

SLEEP

SUBJECT: Z-zzzz

TASK: Supervises sleep period

OBJECTIVES: Be able to (1) discuss sleeping schedules for infants
(2) describe the procedures to follow when supervising sleeping periods

REFERENCE: Brisbane, Holly E. *The Developing Child.* Peoria, Illinois: Charles A. Bennett Company, Inc., 1965. pp. 113-116.

The rate of growth and requirements for sleep are closely related. A baby needs more sleep when he is growing rapidly than when his growth slows down. A newborn baby sleeps about nineteen hours out of twenty four hours or approximately eighty per cent of the time. Babies, however, do vary in the amount of sleep needed. Some babies as young as two to three weeks old get along on fifteen to sixteen hours of sleep a day.

A very young baby sleeps in short periods of two or three hours with waking periods between feeding time. Gradually, the baby is able to eat more food as his stomach increases in size, and he also begins eating foods other than milk. This causes him to sleep for longer periods of time before waking for the next feeding. As physical growth slows down, the baby will need less sleep. By the time he is one year old, the baby sleeps approximately fifty per cent of the time. This includes a morning and afternoon nap.

Good sleep habits are affected by the position in which the child sleeps. Since the baby is unable to move his body for the first three to four months, he should be rotated during sleep from side to side and from back to side and from side to stomach. This helps to prevent the baby's bones from being misshapened and to eliminate fatigue. When a baby is old enough to roll from side to stomach, or from side to back, he will no longer need help in shifting his position.

One of the most relaxing positions for an infant while sleeping is on his stomach. This position can be encouraged by laying him down on his stomach rather than on his back. When the baby sleeps on his stomach, he can stretch to his full length. This enables him to use his lungs to his full capacity. The pressure on the bones of the skull is less in this position and the possibility of a misshapen head is prevented. He is also less likely to kick off his bed covering. A final advantage is that he can lift up his head and chest with his hands and arms, which aids in strengthening his muscles.

The mattress should be firm. It should be well stuffed so the body of the baby will not snuggle down and his air supply be cut off. The mattress should be protected with a mattress cover and covered with a cotton mattress pad which can be changed frequently if wet. Contour sheets for use on the bottom are excellent. Sleeping blankets are safe, but they can be confining. A light blanket tucked in at the sides and foot is satisfactory is the child is adequately clothed at nap time.

If bedding or bath clothes are to be laundered, check with your supervisor for instructions.

QUESTIONS:

1. A new born baby sleeps approximately
    a. fifty per cent of the time.
    b. twenty-five per cent of the time.
    c. eighty per cent of the time.

2. At one year of age the baby sleeps approximately
    a. eighty per cent of the time.
    b. half of the time.
    c. twenty per cent of the time.

3. How is the amount of food an infant takes related to sleeping?

4. a. Which position is thought to be the most restful for babies?
    b. List five advantages of the baby sleeping in this position.

5. What may happen if the infant is allowed to sleep in one position continuously?

6. Why should a baby's mattress be firm?

7. How should mattresses be protected?

8. According to Brisbane, in what three ways does the amount and quality of sleep affect an individual?

9. What temperature should the room be during baby's nap time?

10. What kind of attitude toward sleep should a child develop?

11. What three things should be done to prepare a baby for his afternoon nap?

UNIT XI-7

SUBJECT: Splash, Splash!

TASK: Bathes the infant

OBJECTIVE: Be able to describe the procedure for bathing an infant

REFERENCES: Brisbane, Holly E. *The Developing Child*. Peoria, Illinois: Charles A. Bennett *Company, Inc., 1965.* pp. 91-96.

U.S. Department of Health, Education, and Welfare. *Infant Care*. Washington, D.C.: U.S. Government Printing *Office, 1966*. pp. 27-31.

Bathing a baby can be a pleasant experience if you are familiar with the procedure to use and feel comfortable about assuming this responsibility. It is a satisfying time for the baby, also, because it provides contact with another person. Talk to the baby and smile often. *Plan ahead* and then enjoy the bathing activity if you are assigned this *task*.

QUESTIONS:

1. According to Brisbane, what temperature should the room be when bathing infants?
2. What temperature water should be used for an infant's bath? How can you test the water temperature?
3. a. What procedure should be used to clean the infant's ears and nose?
   b. What should never be used to clean the nose?
4. What is cradle cap? What treatment can be used to clear it up?
5. The baby's face should be washed with
   a. soap and water.
   b. water only.
   c. oil.
6. When washing and drying the baby, special attention should be given to what areas?
7. What is the result if too much powder is used after bathing a baby?
8. What may happen if the baby is bathed soon after being fed?

9. Why is it not a good idea to shake bath powder directly on the baby?

10. What is the most important safety rule to follow when bathing a baby?

UNIT XI-8

INFANT CARE

SUBJECT: Don't Be Half-Safe!

TASK: Follows safety precautions when caring for infants

OBJECTIVES: Be able to (1) recognize safety precautions to observe when feeding, bathing, diapering, and dressing infants
(2) analyze procedures used on the job in terms of safety

REFERENCE: U.S. Department of Health, Education, and Welfare. Infant Care. Washington, D.C.: U.S. Government Printing Office, 1966. pp.68-71.

Emergencies and the consequences of carelessness are easier to prevent than to treat, but the price of safety is constant alertness on the part of everyone in the nursery school. One of your most important jobs as a child care aide is to keep children physically safe and happy. Young children need protection at all times--in the bath, when dressing, eating, sleeping, or playing. Safety precautions to observe in each of these situations are included in this unit.

Bathing

1. Collect all supplies before beginning the bath so you will not have to leave the baby.
2. Place the supplies where they cannot be reached by the baby.
3. Place the tub in a solid position before filling.
4. Test the temperature of the bath water with the elbow or on the inside of the wrist to be sure it is not too hot or too cold.
5. Always support the neck and the back of the baby when he is not lying flat.
6. Use twisted cotton for cleaning a baby's ears and nose, never a swab stick.
7. Hold a soapy baby by putting your index finger and thumb around his arm, just below his shoulder, so he cannot wiggle out of your hands.
8. Never leave a baby unattended while giving him a bath.

Sleeping

1. Never hang anything over the sides or end of the bed. Babies under a year old have been smothered by pulling down covers left over the crib.
2. Do not use pillows for a young baby.
3. Tuck or pin covers in place so the baby will not become tangled in them.
4. Use a safety belt if available. This belt is attached to the mattress and it in turn is attached to a belt around the baby's body. This give the baby freedom of movement and prevents him from getting his head between the mattress and bed, or snuggling under the covers.
5. Never use a plastic bag on the mattress for protection. It could smother the child if he got to it.
6. Check occasionally during nap to see that infant is not under covers or caught between bars of crib.

Dressing

1. Avoid injuring the baby's arms by laying him on the clothing (clothing with front opening) and gently holding his hand in yours while pulling his hand through the sleeve.

Diapering

1. Follow the instruction of the baby's parent about the use of lotion or powder.
2. Keep your finger between the diaper and the baby's body when pinning the diaper to avoid pinning it too tightly or sticking him.
3. Avoid putting safety pins in your mouth or pinning them to your clothing while changing the baby's diaper.
4. Place open safety pins in a bar of soap to avoid losing them and to make pinning easier.
5. Keep unused safety pins closed and in a container.

Feeding

1. Test the temperature of liquids on the inside of your wrist. They should be neither hot nor cold.
2. Check to see if the liquid fills the nipple of the bottle so that air will not be swallowed.
3. Always follow the parents' instructions with regard to the baby's diet.

Playing

1. Toys for small babies should
   a. not have sharp edges, button eyes, small beads, or detachable parts.
   b. be washable.
   c. be clean and in good repair.
   d. not be kept in plastic bags.

QUESTIONS:

1. When diapering a baby, one should
   a. stick safety pins onto something out of reach of the baby.
   b. store safety pins in a covered container.
   c. pin diaper with hand between diaper and baby.
   d. all of these.

2. A sleeping child is safer when
   a. no pillow is used.
   b. a bottle holder is used.
   c. windows are wide open.
   d. none of these.

3. When choosing toys for infants, select
   a. toys that can easily be washed.
   b. large objects that infant cannot swallow.
   c. toys that are in good repair.
   d. all of these.

4. What can be done to check the temperature of the baby's milk?

5. Why should plastic bags never be left where infants might find them?

ASSIGNMENT:

If you work with infants at your training station, make a check list of safety precautions to observe while performing the tasks you have been assigned.

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UNIT XI-9

SUBJECT: Call the Doctor!

TASK: Recognizes symptoms of illness

OBJECTIVES: Be able to (1) recognize symptoms of illness in infants
(2) describe process for taking an infant's temperature

REFERENCES: U.S. Department of Health, Education, and Welfare. *Infant Care*. Washington, D.C.: U.S. Government Printing Office, 1966. pp.65-68.

Home Nursing. The American Red Cross. New York: Doubleday and Company, Inc. pp. 186-193.

The baby is relatively immune to diseases for the first four to six months of life. After that respiratory and gastrointestinal illnesses are likely to begin. During the winter months, babies suffer from respiratory troubles; during the summer, gastrointestinal illnesses occur. Babies from families where parents can afford time, attention, and medical care are likely to have fewer illnesses than babies who come from families who cannot afford adequate medical care.

Mortality during the first year of life is still high, in spite of modern medical methods of immunization and new drugs. One of the reasons for this is that adults often do not realize how quickly a minor ailment in a baby can turn into something serious. Even though adults recover from minor ailments quickly, this is not always the case with infants. A temperature or runny nose may quickly develop into a serious illness if not cared for properly.

If an older child in the nursery school is not well, it is essential that he not have any contact with the infants. Today older children's diseases are not so serious because of the new methods of immunization and the new drugs that are so widely used; however, they can be very serious for a baby. If you, as the child care aide, have even a slight cold, you should not care for the infants. Their immunity to disease is not well developed, and they easily pick up contagious illnesses.

If there is an epidemic of one of the children's diseases, such as mumps, measles, or chicken pox, in the school, the baby should be watched closely for signs of illness. The supervisor should be told at once if any symptoms appear. The following are common symptoms:

1. Fever (rectal temperature of 101 degrees or over)
2. Drowsiness or unusual irritability
3. Vomiting (spitting up small amounts of milk soon after feeding is not to be considered vomiting)
4. Loose, fluid bowel movements marked with odor changes and unusual color
5. Rash (not heat rash)

The body temperature of a baby should be taken in the rectum. When taking the rectal temperature, dip the bulb of the thermometer in petroleum jelly or cold cream. Place the baby on his stomach across your knees. He cannot squirm out of this position very easily, and his legs are down out of the way. Insert the thermometer gently into his rectum. Push it in with a light touch, letting the thermometer find its own direction. If you hold it too stiffly, it may poke him. Once the thermometer is in, it is better to take your hand off the end of the thermometer because if the baby twists or squirms it might hurt him. Instead lay the palm of you hand acorss his buttocks and lightly hold the thermometer between two of the fingers. When the child is old enough to lie still, a rectal temperature can be taken as the child lies on his side with his knees drawn up a little.

A baby who is healthy will

1. be in motion constantly, even when asleep.
2. eat well.
3. have one to two bowel movements a day.
4. have bright, shiny eyes.
5. be in a good humor.
6. have pink cheeks and smooth skin.
7. sleep soundly and be alert when he wakes up.

If an infant does not fit this description, any deviations should be reported to your supervisor.

QUESTIONS:

1. What should you do if a baby's temperature is over 101 degrees?

2. If the child has any symptoms of illness, you should
   a. hold him for the remainder of the day.
   b. call the parent.
   c. report the findings to the supervisor.

3. Discuss the following--"Childhood diseases are so mild it is good to expose the baby to them so you can get them out of the way."

4. When is the best time to begin immunizations?

5. What is "temporary passive immunity"?

6. What are the six diseases from which some protection can be given?

7. What method is usually used for taking the body temperature of a young baby?

8. Write the directions for cleaning a thermometer.

9. Write the list of common symptoms of illness.

10. What is the average mouth temperature? rectal temperature? axillary temperature?

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UNIT XII-1

THE EXCEPTIONAL CHILD

SUBJECT: Where Are You Going?

TASK: Assists in the services provided for exceptional children in educational, institutional, or day care situations

OBJECTIVES: Be able to (1) identify types of services and facilities, public and private, for exceptional children
(2) define major objectives of programs and services in relation to a given facility or setting

REFERENCES: Supplementary: Careers in the Field of Mental Retardation. New York: National Association for Retarded Children, 1968. pp. 8-10.

__________. Occupations in the Care and Rehabilitation of the Mentally Retarded. Washington, D.C.: U.S. Government Printing Office, 1966. pp. 7-10; 64.

__________. The Parents Ask about Available Services in Texas for Mentally Retarded. Austin, Texas: Texas Education Agency, Division of Special Education, 1969. Entire pamphlet.

Recent legislation has paved the way for expanded facilities and services to provide a comprehensive program for exceptional children. Existing facilities and services, both public and private, provide diagnosis, evaluation, guidance, counseling, treatment, care, education, training, and/or employment for the exceptional child or adult. The overall objective is to meet the needs of each individual and to help him to become as self-sufficient as possible. Emphasis is on the exceptional child as an individual worthy of society's concern. Each facility, therefore, has its special purpose to fulfill in completing the program of services.

New trends in the education and training of exceptional children include resource centers for children with learning disabilities, satellite centers which serve as forerunners of public school education programs in small communities, church and community sponsored recreation programs, and regional educational service centers. The satellite centers may be simple or broad in the nature of services they provide, depending on local needs, resources, and commitments.

New preschool and early childhood education programs are being developed (1) to stimulate all developmental areas of the exceptional child--emotional, social, intellectual, and physical and (2) to provide supplementary guidance to the parents. They will seek to enlist the help of parents in providing a totally comprehensive program.

The types of services and facilities available in the community will be influenced by the number of individuals who require such services, their ages, and the extent and nature of their disabling conditions. Public understanding and support are necessary ingredients for expanding existing programs for these individuals.

Less than a generation ago many experts believed that intelligence was fixed at birth. Only a few disputed that theory. Today research has shown that human warmth and intellectual stimulation can improve mental ability. What one is able to do is not determined by mental ability alone, but it is also a result of one's response to his environment. Mental as well as physical ability can deteriorate from neglect and deprivation. It follows, therefore, that an improved environment may provide the basis for changing the life of any exceptional individual.

In addition to the types of child care centers discussed in Unit I-1, Baby Sitter or Teacher, the child care aide who is interested in working with exceptional children may find opportunities for employment in a variety of types of facilities providing services for these children. Many of these facilities are similar to those serving the general needs of children, but their primary objectives are to provide training and care based on the specific needs of exceptional children. These services and facilities may be publicly or privately operated and funded. They may serve individuals with all types of disabling conditions, or they may specialize in serving a particular group of individuals.

Typically, the needs for care and training of exceptional children are met by

* Diagnostic, evaluation, and treatment centers
* Preschool nurseries
* Day care (activity) centers
* Private day schools
* Special education classes in public schools
* Special training classes or centers
* Sheltered workshops or sheltered employment
* Halfway houses
* Institutional care centers
* Residential treatment, training, and/or care centers (private or public)
* Recreational programs, centers, and summer camps
* Public health and child welfare services
* Parent counseling and homemaker services
* Vocational rehabilitation and placement services
* Religious training programs

The child care aide needs to know (1) the types of services and facilities available for exceptional children and their parents in the city and community where she lives and (2) how other programs function in relation to the training station in which she is employed. Determining the goals and objectives of the facilities found locally, should some knowledge of the overall scope of their services. The aide should assume some responsibility for helping to promote the program of services for exceptional children and adults, particularly in the facility in which she is employed.

Many agencies are attempting to expand the educational and training efforts into the housing arrangement or home of the exceptional child. For this reason the parents of the exceptional child are much more involved in the program of services than parents usually are in child care centers.

The following list includes the typical types of services and the major objectives of the various agencies:

Services

1. Diagnostic and evaluation--coordinated medical, psychological, and social services combined with educational and vocational services as needed
    - * To diagnose, appraise, and evaluate the child's impairment
    - * To determine needs of the child and his family in coping with the impairment
    - * To recommend a plan of services to meet the above determined needs

2. Treatment--special medical, psychiatric, neurological, or surgical treatment and services, such as physical therapy, speech and hearing therapy, occupational therapy, psycho-therapy, and counseling
    - * To improve the functioning of the child through the above services

3. Educational--special education provided through appropriate instruction for preschool, school-age, and/or beyond school age individuals through both public and private facilities
    - * To develop basic self-help skills, preacademic skills, social skills, and perceptual-motor skills
    - * To work closely with the home and parents in promoting achievement of developmental tasks by their children
    - * To provide environmental enrichment for stimulating intellectual development and motivating the individual
    - * To help children to become aware of and accept their sensory deficits, such as blindness
    - * To assist the individual in benefiting from the school program
    - * To develop specialized vocational skills

4. Training--specialized training in group activity as well as group living arrangements
    - * To train in self-help, motor, and occupational skills
    - * To provide the opportunity for daily living activities, social experiences, and personality development

5. Personal care--food, shelter, clothing, special nursing, and medical care
    - To expand the individual's opportunities for learning to meet these needs
    - To prevent his regressing into his "old self"

6. Sheltered workshop--supervised training and employment for youth and adults
    - To provide work adjustment training, occupational training, employment, work evaluation
    - To provide other opportunities for developing social skills

7. Supplementary--other services, such as parent counseling and homemaker services, public health and child welfare services, and religious training
    - To assist the family in the added responsibilities involved in the care and training of exceptional children

The above described services may be provided in the following basic types of facilities or agencies:

Facilities

1. Diagnostic and evaluation clinics--facilities, such as diagnostic centers and evaluation clinics staffed with doctors, counselors, social workers, psychologists, nurses, and therapists
    - To determine the extent and nature of the child's impairment
    - To plan for treatment and other services needed to help the child to adjust to the impairment
    - To evaluate the child's progress periodically

2. Day facilities--facilities, such as nursery and day schools, training classes, sheltered workshops, day care and activity centers, and guidance centers, which provide treatment, education, training, personal care, supplementary services, and/or sheltered work experiences on less than 24-hour-a-day basis
    - To provide a wide range of services and experiences for this individual in an adequately supervised and controlled environment
    - To make it possible for the exceptional child to live at home and in his own community
    - To give the parents of exceptional children some relief from 24-hour care
    - To help parents and families have a better understanding of the problems of children with impairments

3. Public school programs of preschool and special education
    - To enable exceptional children to achieve the same kind of educational objectives as those sought by all children

4. Residential facilities--facilities, such as public or private institutions, private and state schools, and hospitals which provide treatment, education, training, personal care, and/or sheltered workshop services on a 24-hour-a-day basis
    - To provide a wide range of services for individuals who are totally dependent and cannot remain at home because of the severity of the

disabling condition and related emotional or behavioral problems
- * To provide temporary care and training for some who will be able to return to their homes and communities after receiving these services in a residential facility

5. Group home facilities or independent living centers--facilities, such as halfway houses which provide limited supervision in housing, counseling, and group activities for young people and adults who are ambulatory, capable of feeding and dressing themselves, toilet trained, and able to communicate their basic needs
   - * To provide opportunities for the individual to function with as little need for guidance as possible
   - * To give individuals an opportunity to become adjusted to community life

QUESTIONS:

1. The overall objective of most services for exceptional children is
   a. to help each child become as self-sufficient as possible.
   b. to care for all who are neglected.
   c. to treat children for all types of disabling conditions.

2. Which is probably not a new trend in services for exceptional children?
   a. Satellite programs in small communities
   b. Preschool and childhood education programs
   c. Resource centers
   d. State institutions

3. Treatment services are provided mainly
   a. to improve the overall functioning of the child as much as possible.
   b. to provide corrective surgery for impairments.
   c. to prevent hospitalization of the child.

4. Supplementary services for exceptional children and their parents probably do not include
   a. parent counseling.
   b. treatment and surgery.
   c. welfare services.

With which of the following statements (items 5-9) about services for exceptional children do you agree?

a. Write on your answer sheet A if you agree with the statement.
B if you disagree with the statement.
b. Briefly explain your reasons for disagreeing with any of the statements.

5. Services for exceptional children are expanding to meet more of their needs for education and training.

6. Exceptional children are given opportuntities to develop self-help skills through specialized training services only.

7. Special educational experiences are often needed by exceptional children to help them reach the objectives in the regular preschool or classroom setting.

8. Personal care services may be necessary to expand the exceptional child's opportunities for learning.

9. Halfway houses provide continuous supervision in personal-social relationships of exceptional individuals.

Select the facility or agency whose services help to meet the objectives listed in items 10-17. The types of facilities may be used more than one time. Some questions may have more than one answer.

OBJECTIVES

10. To evaluate the child's impairment
11. To relieve parents from constant care for a portion of the day
12. To provide continuous care and training for totally dependent children
13. To help young people adjust to living in the community
14. To provide temporary as well as continuous care and training
15. To determine types of services needed for exceptional children
16. To provide a controlled and well supervised environment for training these children
17. To provide opportunities for independent living when individuals are able to function with limited guidance

FACILITIES

A. Day activity centers
B. Diagnostic clinics
C. Halfway houses
D. State schools

ASSIGNMENT:

Describe the type of facility in which you are employed as a child care aide. Be sure to answer the following questions:

a. Does the facility specialize in the care and training of children with only one major type of handicap, such as mental retardation? Specify the type or types of exceptional children being trained and cared for in this facility.

b. What services are provided for the exceptional child? for his family?

c. What are the primary objectives of the facility in relation to the needs of the exceptional child?

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UNIT XII-2

THE EXCEPTIONAL CHILD

SUBJECT: What Is the Matter?

TASK: Assists in the services provided for exceptional children in educational, institutional, or day care situations

OBJECTIVES: Be able to (1) identify types of exceptional children
(2) recognize basic differences in these types of exceptional children

REFERENCES: Required: Leeper, et al. Good Schools for Young Children. New York, New York: The Macmillan Company, 1968. pp. 422-437.

Supplementary: Children's Bureau Series on Children with Handicaps. Washington, D.C.: U.S. Government Printing Office, 1965.

1969 Facts--March of Dimes. New York, New York: The National Foundations--March of Dimes, 1969.

The term "exceptional child" characterizes the child whose intellectual, physical, or social condition is seen by society as differing from that of the average child to such an extent that special education programs are needed. He may be gifted, or he may have one or more impairments or disabling conditions. His overall capacities on existing tests and other criteria indicate learning ability and developmental tasks outside the average range. The tests rate the individual in relation to intelligence quotient (I.Q.). Children in the "above average" group are considered to be gifted, whereas those in the "below average" may be known as mentally retarded children. Many children within this range are exceptional in other ways although they are not gifted or mentally retarded.

Some of these children are ambulatory and some are non-ambulatory. Ambulatory means that they are able to walk or move about without help although they may require appliances, such as braces, for walking. Non-ambulatory children are unable to walk or move about without help. They may be bedfast and unable to care for any of their needs.

Rich and poor alike may be affected by the various forms of exceptionality. For example, in addition to being mentally retarded, the child may have one or more handicaps and be considered multiply handicapped. He may be

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mentally retarded and deaf or mentally retarded and blind. On the other hand, a child may be gifted in one aspect of development and only average in another.

The term "handicapped" means unable to compete successfully in all areas of life or unable to adjust to normal living conditions. Special educators today prefer to use the word impairment rather than handicap since training and education tend to reduce the effects of the handicapping or disabling condition. These children are then able to function within normal living conditions with some degree of success.

Types of exceptional children typically found in educational, institutional, and day care situations may include:

Mentally Retarded--Individuals whose mental development has been delayed, causing them to learn slowly or to behave inappropriately.

Physically Handicapped--Individuals who have crippling conditions or health problems, resulting in difficulty in moving about and communicating with others. They may have lowered vitality and lack energy.

Visually Impaired--Individuals whose sense of vision is faulty or completely non-functional and who need help in acquiring skills in moving from place to place, understanding the environment, and forming friendships.

Auditorially Impaired--Individuals whose sense of hearing is defective or non-functional and, who as a result, may have problems in communication and social adjustment.

Emotionally Disturbed--Individuals whose overall behavior pattern is one of non-adjustment or failure to adjust because it interferes with the lives of those about them and constantly disrupts their own ability to function.

Children with Minimal Brain Dysfunction--Individuals who display problems in specific areas of functioning but who are otherwise normal or above average in mental ability. Areas of disability may be language, reading, perceptual-motor functioning, and behavioral stability. Hyperactivity is frequently a behavior pattern in young children with minimal brain dysfunction.

Multiply Handicapped--Individuals who display two or more disabling conditions typical of which may be crippling, mental retardation, visual impairment, or auditory impairment.

Culturally Deprived or Disadvantaged--Individuals who are limited in language ability, lack stimulating experiences in the environment, and are seriously behind other children in their development of skills and aptitudes.

Recent research has shown that the largest percentage of exceptional children are the mentally retarded. For this reason, the needs of the mentally retarded are continually emphasized. Many programs and services, therefore, are focusing on education and training for these individuals. Since mentally retarded children often have other impairments as has been mentioned, many have expanded to include services for a variety of types of exceptional children and adults.

The material in Unit XII-3 through XII-8 will concentrate on information for child care aides working with individuals whose primary impairment is mental retardation. Much of it will also be appropriate for aides working with other exceptional children.

Additional information about mental retardation may be secured by writing the following agencies:

The Council for Exceptional Children
1201 Sixteenth Street, N. W.
Washington, D.C. 20036

National Association for
Retarded Children, Inc.
420 Lexington Avenue
New York, New York 10017

Joseph P. Kennedy, Jr. Foundation
719-13th Street, N. W.
Washington, D.C. 20009

President's Committee on
Mental Retardation
South Building, Room 5064
Washington, D.C. 20201

If you are involved in the care and training of individuals who are physically handicapped, visually impaired, auditorially impaired, emotionally disturbed, multiply handicapped, or those with minimal brain dysfunction, additional information may be secured from some of the organizations listed below:

Alexander Graham Bell Association for the Deaf
1537-35th Street, N.W.
Washington, D.C. 20007

American Academy for Cerebral Palsy
University Hospital School
Iowa City, Iowa 52240

American Foundation for the Blind
15 West 16th Street
New York, New York 10011

Association for Education of
the Visually Handicapped
711-14th Street, N.W.
Washington, D.C.: 20005

American Speech and Hearing
Association
9030 Old Georgetown Road
Bethesda, Maryland 20014

Association for the Aid of
Crippled Children
345 East 46th Street
New York, New York 10017

Association for Children with
Learning Disabilities
2200 Brownsville Road
Pittsburgh, Pennsylvania 15210

Information Center--Recreation
for the Handicapped
Outdoor Laboratory
Little Grassy
Southern Illinois University
Carbondale, Illinois 62901

Muscular Dystrophy Association of America Inc.
1790 Broadway
New York, New York 10010

National Committee for Multi-Handicapped Children
339-14th Street
Niagara Falls, New York 14303

National Society for Crippled Children and Adults
2023 West Ogden Avenue
Chicago, Illinois 60612

U.S. Social and Rehabilitation Service
Children's Bureau
330 C Street, S.W.
Washington, D.C. 20201

National Association of Hearing and Speech Agencies
919-18th Street, N.W.
Washington, D.C. 20006

The National Foundation--March of Dimes
800-2nd Avenue
New York, New York 10017

United Cerebral Palsy Associations, Inc.
66 E. 34th Street
New York, New York 10016

U.S. Office of Education
Bureau of Education for the Handicapped
7th and D St., S.W.
Washington, D.C. 20202

Many of the agencies and organizations listed have regional, state, and local offices in many of the major cities. It would be well to investigate the local community for all organizations concerned with the welfare and training of the exception child. They may be able to make suggestions for other available resources which will acquaint you with the capabilities of the exceptional child.

QUESTIONS:

1. Define the following terms:
   a. exceptional child
   b. handicapped
   c. ambulatory child
   d. non-ambulatory child

2. Mentally retarded children need
   a. more praise and rewards than "average" children.
   b. about the same amount of praise and rewards as "average" children.
   c. less praise and rewards than "average" children.

3. According to Leeper, et. al., the exceptional child which is least difficult to absorb within the regular preschool program is the
   a. emotionally disturbed.
   b. mentally retarded.
   c. physically handicapped.

4. The visually impaired is likely to
   a. lack hearing ability.
   b. excel in hearing ability.
   c. have normal hearing.

5. Auditorially impaired children have
   a. no sense of smell.
   b. limited vision.
   c. limited hearing.

6. Children with minimal brain dysfunction are likely to have
   a. normal or above average mental ability.
   b. below average mental ability.
   c. delayed mental development.

7. A child having two or more disabling conditions is called
   a. disadvantaged.
   b. multiply handicapped.
   c. maladjusted.

ASSIGNMENT:

I. a. Write to one or more of the agencies listed on pages A-211 through A-212. Tell them the type of center in which you are working, and ask for materials related to any of the exceptional children with whom you work.

   b. If there are local chapters of any of these organizations, talk with your teacher and training sponsor about the possibility of your visiting the office or attending one of their meetings. Write a brief report of your visit.

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UNIT XII-3

THE EXCEPTIONAL CHILD

SUBJECT: Who Is He, Anyway?

TASKS: Assists in the services provided for exceptional children in educational, institutional, or day care situations

OBJECTIVES: Be able to (1) differentiate between mental retardation and mental illness
(2) list known causes of mental retardation
(3) identify the most common clinical types of mental retardation and disorders associated with retardation
(4) define levels of retardation in relation to the child's needs for care and training
(5) describe specific characteristics of mentally retarded children

REFERENCES: Required: Bensberg, Gerald J. (ed.) Teaching the Mentally Retarded. Atlanta, Georgia: Southern Regional Education Board, 1965. pp. 1-5; 19-29.

Perry, Natalie. Teaching the Mentally Retarded. New York: Columbia University Press, 1962. pp. 19-21.

Recreation and Physical Activity for the Mentally Retarded. Washington, D.C.: American Association for Health, Physical Education, and Recreation, 1966. pp. 9-13.

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Occupations in the Care and Rehabilitation of the Mentally Retarded. Washington, D.C.: U.S. Government Printing Office, 1966. pp. 1-6.

Filmstrip: More Than Love. New York, New York: The National Foundation--March of Dimes. (Available on free loan basis from local or regional office.)

Mrs. McIver, the nursery school teacher, says that Johnny is mentally retarded and that Mark is a "normal" child. How can she tell that Johnny is mentally retarded? In what ways is Johnny like Mark? Does he look the same or different? Does he have the same human needs? Does he understand what Mrs. McIver tells him? Is he able to learn anything at all? What caused Johnny to be mentally retarded?

Many questions are being asked about children with mental retardation. There are many answers given to questions such as these. Opinions vary and facts are often distorted. The child care aide working with mentally retarded children, however, must know how to answer these questions correctly. She must know as much as possible about the children with whom she works in order to be able to perform successfully on her job.

An individual may be mentally retarded because of something that happened before his birth (pre-natal), during his birth (peri-natal), or early in his childhood (post-natal). According to a 1969 report from the U.S. Department of Health, Education, and Welfare, more than 200 causes of retardation have been identified and many others are suspected. These causes, some of which are shown in the following chart, are grouped into three major categories.

CAUSES OF MENTAL RETARDATION

PRE-NATAL	Irregulatiries of genes	a. Incompatibility of genes inherited from parents b. Chromosome abnormalities (e.g., Mongolism) c. Rh-factor incompatibility between mother and infant d. Inborn errors of metabolism (e.g., phenylketonuria or PKU)
	Conditions during pregnancy	a. German measles during first tri-mester b. Infections, poisons c. Poor nutrition d. Drugs and x-rays e. Venereal disease
PERI-NATAL	Conditions at birth	a. Injury or stress during birth process b. Premature birth c. Lack of oxygen supply to infant's brain
POST-NATAL	After birth	a. Injuries, accidents b. Certain childhood diseases (e.g., encephalitis, meningitis, mumps) c. Glandular imbalance in the child d. Blood chemistry factors
	Environmental factors	a. Neglect and deprivation during early childhood b. Severe emotional problems

Many of the causes of mental retardation that are indicated on the chart are specifically physical or biological. A large number of children, however, are retarded as a result of a deprived environment where there is little opportunity to learn. These individuals are often referred to as socially and culturally deprived, "disadvantaged," or pseudo-retarded.

Serious emotional problems early in life can also cause retardation since such problems tend to halt the normal intellectual development of the child.

Of the approximately 6 million mentally retarded individuals (30 per 1000 people) in America today, approximately 2 per cent are classified as clinical types. Most mentally retarded children do not look different from normal children, but differ only in ability to learn. Those with clinical types of retardation, however, differ from the "normal" in physical appearance as well as in learning capacity. Mongoloids, cretins, microcephalics, and hydrocephalics are examples of clinical types. These may be described as follows:

1. Mongolism or Down's Syndrome
    * have physical resemblance to some Asiatics
    * are usually friendly and affectionate
    * have very slow rate of mental and physical development--growth in height usually ceases at an early age; tend to be overweight in relation to height
    * usually have poor speech development particularly pronunciation and articulation--about 2 to 3 year level
    * often have secondary defects or disabling conditions

2. Cretinism
    * often confused with mongolism in early life
    * is dwarflike in physical development due to defect of the thyroid gland
    * has slow, awkward physical movements--shuffling, waddling
    * has relatively large head with lots of hair; short, broad extremities; stumpy, deformed hands and feet; and round, protruding abdomen
    * may not learn to speak, if untreated, except for indistinct sounds in a low pitched voice

3. Microcehpalus
    * has unnaturally small head due to imperfect development, brain typically one-fourth usual weight

4. Hydrocephalus
    * usually characterized by an abnormally large head due to an accumulation of excessive cerebro-spinal fluid in the brain area
    * may be progressive
    * may require support of the head because of size of skull

A disorder often associated with mental retardation is cerebral palsy which results from brain damage before, during, or after birth. Cerebral palsy is a condition which affects primarily motor control. A person with cerebral palsy frequently has speech defects, hearing disorders, physical and visual impairments, and personal and social maladjustments. Many are mentally and/or educationally retarded. Some can profit from special classes where there is interaction between handicapped and normal children.

Now that you know some of the causes of mental retardation, you are probably becoming aware that mental retardation may occur in varying degrees, affecting the capabilities of different individuals in different ways. Although all mentally retarded children learn slowly and are limited in learning ability, they are not all slow and limited to the same degree. For this reason, you may be working with individuals whose chronological ages range from a few weeks to 21 years. Their mental ages, however, generally range from a few weeks to approximately 12 years. These individuals will also differ in overall adjustment to their disabling conditions, since their experiences may range from no intellectual stimulation to "smother-love."

The levels of retardation most commonly found among children in educational, institutional, and day care settings are classified as mild, moderate, severe, and profound. Now, what do these terms mean in relation to the child's abilities and needs?

Mildly Retarded (educable)--can learn some academic skills and learn to live independently

Moderately Retarded (trainable)--cannot learn academic subjects or become independent; can learn to perform simple tasks in sheltered or supervised settings

Severely Retarded (trainable or sub-trainable)--is dependent; unable to learn more than basic self-care; requires continued care and supervision

Profoundly Retarded--is totally dependent; requires continued institutional living

Understanding the differences between the terms "educable" and "trainable" retarded will be particularly essential to the child care aide who works with mentally retarded children. The aide must recognize that these terms indicate the degree of retardation and give a clue as to how much the child is likely to learn. For example, the mildly retarded or "educable" child generally has a mental age ranging from 8 to 12 years at maturity. The maximum mental age of the moderately retarded or "trainable" ranges from 5 to 8 years. The major difference in learning ability, therefore, is that the educable can learn to live independently with training and the trainable cannot. The academic learning capabilities, however, will not be the only determining factor in classifying the level of mental retardation.

In addition to the characteristics given in the assigned references, Garrison and Force[1] describe the mentally retarded as follows:

1. Learning characteristics
    a. slow in learning complex and abstract materials
    b. grasp ideas at a much slower rate than others of his age
    c. has difficulty expressing time relations
2. Language skills
    a. may have greater speech difficulty than "normal" children
    b. tend to have few ideas, make incomplete sentences, and phrase statements poorly
    c. may show lack of interest in activities involving language skills
3. Physical and motor development
    a. may be slow in walking and moving about
    b. often physically underdeveloped and lacking in motor control and coordination
    c. slow to develop physical skills
    d. likely to have several handicaps, such as cleft palate, congenital blindness or deafness, absence of legs or arms, cerebral palsy, or epilepsy

Unit XII-6, That's a No-No! discusses specific behavioral characteristics of mentally retarded children in more detail.

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[1] Garrison, Karl C. and Force, Dewey G. The Psychology of Exceptional Children. New York: The Ronald Press Company, 1965. pp. 72-77.

QUESTIONS:

1. According to Gensberg, mental retardation and mental illness have certain differences. With which of the following statements would Gensberg agree?

    a. Mental retardation is incomplete or slow mental development.
    b. Mental illness is most often present at birth or shortly after birth.
    c. Mental retardation is not likely to be curable.
    d. Drugs, such as tranquillizers, are the main treatment for mental retardation.
    e. Mental illness is often detected by observing sudden changes in behavior and personality of the individual.
    f. An important characteristic in mental illness is emotional difficulty.
    g. A major characteristic in mental retardation is limited ability to learn and understand.
    h. A mentally retarded individual is usually friendly, loves attention, and behaves like a younger child.
    i. An individual with mental retardation is usually withdrawn and fearful of people or overly talkative with many worries.

2. Approximately how many causes of mental retardation are known today?
    a. Less than 100
    b. Between 100 and 200
    c. More than 200

Select the correct word or phrase below to complete the blanks in questions 3-6.

Deprived
Drugs
Encephalitis
German measles
Meningitis

Mongolism
Mumps
Oxygen
PKU
Water

3. Mental retardation may be the result of irregularities of genes which cause chromosome abnormalities or ____________; inborn errors of metabolism or ____________; and Rh-factor incompatibility between the mother and the infant.

4. Mental retardation may develop during pregnancy as a result of the mother's having ____________ during the first tri-mester; poor nutrition of the mother; ____________ and x-rays; and infections, poisons, or venereal disease.

5. Mental retardation may also result from any condition that reduces the ________________ supply to the infant's brain; causes injury or stress during the birth process; or causes a premature birth.

6. Mental retardation may be caused by any one of a number of childhood diseases, such as ____________, ______________, or ______________, or it can be the result of a ________________ environment early in life.

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7. Approximately what per cent of all mentally retarded are considered clinical types?
   a. 5%
   b. 2%
   c. 3%
   d. 10%

In questions 8-11, match the appropriate clinical types of mental retardation with the characteristics.

CHARACTERISTICS

8. Has physical resemblance to Asiatics
9. Is dwarflike with shuffling physical movements
10. Has unusually small head
11. Has abnormally large head

TYPES

A. Cerebral palsy
B. Cretin
C. Hydrocephalic
D. Microcephalic
E. Mongoloids

12. Cerebral palsy affects primarily
    a. speech control.
    b. social development.
    c. motor control.
    d. mental development.

13. With which of the following statements about mentally retarded children do you agree?

    a. All mentally retarded are slow to learn and limited in learning ability.
    b. All mentally retarded are limited in learning ability but some are quick to learn.
    c. All mentally retarded are slow to learn but are not limited in learning ability.
    d. Most mentally retarded require institutional care.

14. The mental ages of mentally retarded individuals usually range from
    a. infancy to 5 years.
    b. infancy to 21 years.
    c. infancy to 12 years.

15. Four levels of mental retardation are
    a. mild, limited, severe, profound.
    b. mild, moderate, severe, profound.
    c. limited, moderate, attainable, severe.
    d. limited, mild, severe, profound.

16. Define the four levels of retardation briefly in relation to the child's needs for care and training.

17. What should the terms "educable" and "trainable" indicate to the child care aide?

18. How would you describe the major differences in the learning abilities of educable and trainable retarded children?

19. Which of the following is not a common characteristic of the mentally retarded?
    a. Short attention span
    b. Creativeness
    c. Limited ability
    d. Lack of coordination

20. Language skills of the mentally retarded show
    a. intense interest in language activities.
    b. many ideas spoken in complete sentences.
    c. greater speech difficulty than "normal" children.

21. The attention span of mentally retarded children is
    a. shorter than normal children.
    b. about the same as normal children.
    c. longer than normal children.

ASSIGNMENT:

View the filmstrip More Than Love. (18 minutes color with script and narration on record. Available on free loan basis from local National Foundation Chapter--March of Dimes or The National Foundation, 800 Second Avenue, New York, New York 10017.)
a. During the viewing, make a list of questions you wish to discuss with your teacher or supervisor at the training station.
b. Write a two page report on a specific birth defect: possible causes, effects, treatment, and possible means of prevention.

UNIT XII-4

THE EXCEPTIONAL CHILD

SUBJECT: May I Help You?

TASK: Works with exceptional children and their parents

OBJECTIVES: Be able to (1) evaluate self for personal qualities needed to work with exceptional children and their parents
(2) identify techniques to use with parents and families of exceptional children

REFERENCES: Bensberg, Gerald J. (ed.) Teaching the Mentally Retarded. Atlanta, Georgia: Southern Regional Education Board, 1965. pp. 29-32.

Perry, Natalie. Teaching the Mentally Retarded. New York, New York: Columbia University Press, 1962. pp. 22-24.

Recreation for the Mentally Retarded. Atlanta, Georgia: Southern Regional Education Board, 1964. pp. 11-15.

PERSONAL QUALITIES

As the number of facilities giving service to exceptional children and their parents increases, the demands for trained personnel to work with these children also increases. Special educators and professionals in the field are optimistic that the Home Economics Cooperative Education programs can help to supply trained sub-professionals. They feel that high school training as child care aides will be an asset for those desiring to continue working with exceptional children after high school graduation. These students can help to fill the need for child care workers, attendants, and teacher aides by learning all they can about child growth, development, and behavior shaping methods to use with exceptional children.

Individuals working with exceptional children should have personal characteristics similar to those of individuals who work with any group of children. In addition to the personal qualities discussed in Unit I-3, Sixteen Tons, and II-2, Scoreboard, the child care aide working in a facility for exceptional children must have (1) a sense of dedication to these children and their problems, (2) motivation to help them accomplish desired goals, and (3) the ability to deal with these children, their parents, and their problems effectively.

To help educate exceptional children, particularly the mentally retarded, one should be able to:

1. Communicate effectively with (a) the child whose ability to comprehend may be slow, (b) professional and sub-professional staff members having varied backgrounds, and (c) parents and family members who may have concerns and frustrations about the child's condition.

2. Respond to varied conditions and job demands while maintaining a sense of humor.

3. Help direct, control, and plan the activities of exceptional children.

4. Deal objectively with exceptional children, particularly mentally retarded.

5. Interpret actions of children into needs to be met.

6. Reinforce desirable behavior.

7. Cope with the noisy environment which results from the voices and activities of children.

8. Observe behavior in distant corners of the room simultaneously--i. e., "eyes in the back of the head."

The child care aide must be patient; firm, but kind; and like each child for what he is. She can contribute much to the happiness and achievements of the exceptional child by being an understanding friend. To be a sincere friend, one must get to know the individual, know some of his differences, know what he likes to do, and be aware of any special problems he has. This is particularly true for the aide who works with mentally retarded children. Special educators suggest that the child care aide develop the ability to

1. observe the child.
2. watch his coordination.
3. notice what he is interested in.
4. take part in his activities, if possible.
5. talk to him and listen to him patiently.
6. ask the supervisor about any special problems he might have.

Among other qualities which are desirable in the child care aide are courage, imagination, love, endurance, energy enough to keep up with active children, sensitivity to and concern for people and their problems, and a special knowledge of characteristics and methods of working with these children. She should be personally secure so that she can accept the limited capacities of the mentally retarded or otherwise handicapped child.

If the child care aide is to help the exceptional child, she must be able to display understanding, intelligence, and warmth. She must know how to handle emergencies and meet unusual behavior situations. She must learn when to give assistance and when to allow the child to "do it himself." As the aide guides the child toward social maturity, she also will make progress toward this same goal.

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Use the checklist below to examine your abilities and feelings toward exceptional children and their parents. This will help you to know if you are likely to be successful in working as an aide with these individuals. Answer each question honestly since your future success with exceptional children may depend on your honest evaluation of your abilities and feelings.

AM I READY FOR A CAREER WITH EXCEPTIONAL CHILDREN?

		YES	NO
1.	Do I really like children?	____	____
2.	Am I able to accept children as they are--even if they are handicapped?	____	____
3.	Do I have an optimistic outlook and sincere enthusiasm for my work with exceptional children?	____	____
4.	Am I patient, flexible, and willing to reteach information to the mentally retarded or otherwise handicapped child as often as is necessary?	____	____
5.	Do I have a sense of humor?	____	____
6.	Do I find satisfaction in helping children achieve objectives within their reach?	____	____
7.	Can I communicate with these children on their level of understanding so that they understand and can follow my directions?	____	____
8.	Am I well-organized and creative so that I can plan unique ways of helping these children develop skills and abilities?	____	____
9.	Can I appreciate even the smallest accomplishments in the child's ability to develop a skill?	____	____
10.	Will I be able to work constantly and directly with children who are mentally retarded or otherwise handicapped?	____	____
11.	Can I learn to work effectively with professional personnel and parents as well as handicapped children?	____	____

	YES	NO
12. Am I able to observe and record behavior patterns objectively without becoming emotionally involved with individual children?	____	____

How did you score?
If you honestly answered yes to ten or more of these questions, working with exceptional children is your kind of job.

ASSIGNMENT:

If you answered yes to less than ten questions, take another look at yourself to be sure that you are seriously interested in this area of child care services. Make a plan to improve yourself if you still believe that you want to work with exceptional children. Discuss this plan with your teacher.

WORKING WITH PARENTS

As a child care aide in a facility serving the needs of the exceptional child, one has frequent contacts with the parents and family members. It is important to (1) develop satisfying rapport with all family members, (2) acquire skill in answering their questions, and (3) learn to handle their complaints without betraying confidences.

Most parents are not prepared psychologically or financially to handle the enormous burden of care and training of the exceptional child. They have many fears, and they are often frustrated and bewildered. They need help in working with their handicapped child. They need someone who will take the time to listen, to understand, to support, and to counsel with them about the problems and potentials of such a child. Although the child care aide will not be able to perform professional counseling services for the parents and families of these children, she may be asked to assume a sub-professional role in relaying and translating information between the parent and the professional staff members.

In order to avoid misleading parents by using negative expressions, here are some positive expressions which are suggested by the National Education Association:

NEGATIVE EXPRESSION	POSITIVE EXPRESSION
Must	Should
Trouble maker	Disturbs others
Below average	Works at his own level
Mean	Has difficulty getting along with others

NEGATIVE EXPRESSION	POSITIVE EXPRESSION
Time and again	Usually
Dubious	Uncertain
Clumsy	Not physically well-coordinated
Selfish	Seldom shares with others
Show-off	Tries to get attention

If the child care aide has responsibilities which involve talking with parents, the following principles of parent interviews should be helpful:

1. Be truthful and honest, showing an honest appreciation of the child.
2. Respect the parent's confidences.
3. Do not be shocked by anything the parent says or does, but take what he says seriously without jumping to conclusions that may be wrong.
4. Make positive comments, but do not be authoritative.
5. Avoid arguing, but do not become defensive.
6. Be sympathetically understanding, but not emotional or sentimental.
7. Let parents have opportunities to talk about what concerns them. Listen to them.
8. Be ready and willing to explain if you know the answers--but recognize when you should refer the parent to the professional staff.
9. Do not belittle what parents do, nor make them feel insecure or inadequate.
10. Give helpful suggestions so that parents are comfortable about leaving their child.

QUESTIONS:

1. The personal characteristics of child care aides who work with mentally retarded children are (similar, completely different) ______________ than for those who work with "normal" or "average" children.

2. What are six commonly accepted attitudes which the Southern Regional Education Board recommend as essential for individuals working with mentally retarded children?
   a.
   b.
   c.
   d.
   e.
   f.

3. A most important factor in successfully training mentally retarded children is the
   a. number of employees which operate the center.
   b. attitudes of employees toward the retarded.
   c. number of retarded children to be trained.

4. In helping to train mentally retarded children, it is important that the child care aide
   a. deal with the children as a group rather than as individuals.
   b. try to work with the children as individuals as much as possible.
   c. work only with small groups of children.

5. Parents of exceptional children are most likely to be
   a. frustrated and have many fears.
   b. mentally retarded.
   c. socially and economically deprived.

6. The child care aide working with the mentally retarded child and his parents should
   a. tell the parents that they are not capable of caring for the child.
   b. suggest that mentally retarded children are usually better off with their parents.
   c. listen to the parents sympathetically without becoming emotional.

7. When working with parents of exceptional children, the child care aide should
   a. agree with their complaints about the center.
   b. answer their questions honestly if she knows and refer them to the supervisor when she does not know.
   c. avoid answering questions and refer them directly to the supervisor for all information.

In questions 8-14, identify the types of expressions Joan, the child care aide, used in each of the parent interview situations.

SITUATIONS

8. Joan told Joe's mother that Joe was a trouble maker.

9. Joan told Kaye's parents that Kaye has trouble getting along with others.

10. Joan told Sherry's parents that it is difficult for Sherry to share things with others.

11. Joan told Judy's parents that Judy is clumsy in recreational activities.

12. Joan told Betty's parents that Betty works at her own level and speed during the art activities.

13. Joan told Billie's mother that Billie is always trying to get attention.

14. Joan told Kathy's parents that Kathy now does more for herself.

TYPES OF EXPRESSIONS

A. Positive
B. Negative

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UNIT XII-5

THE EXCEPTIONAL CHILD

SUBJECT: What Are You Going to Do?

TASKS: Works with professional personnel in facilities for exceptional children

Handles certain clerical responsibilities for professional personnel

Reports or records behavioral changes in each child

Assists professional staff in the overall evaluation of the progress of each child

OBJECTIVES: Be able to (1) determine the role and responsibilities of sub-professional personnel in relation to the facility
(2) recognize ethical behavior when working with professional personnel
(3) identify types of forms and reports typically kept on exceptional children
(4) recognize ways to evaluate each child's progress

REFERENCES: Bensberg, Gerald J. (ed.) Teaching the Mentally Retarded. Atlanta, Georgia: Southern Regional Education Board, 1965. pp. 111-122.

Perry, Natalie. Teaching the Mentally Retarded Child. New York, New York: Columbia University Press, 1962. pp. 237-241; 250-254.

The child care aide in a facility for exceptional children is considered a para-professional or sub-professional in that she does not have professional training or previous professional work experience. She is, however, a much needed "cog" in the wheel of educating and training the exceptional child.

In this capacity, the child care aide may work with administrative staff members, teachers, counselors, physicians, social workers, parents, members of associated service groups, and other adults, as well as the children. She may become (1) an attendant in a ward, cottage, or dormitory of a public or private residential institution or school; (2) a teacher aide in a public school program of preschool or special education; (3) an aide or assistant in a day activity center, recreational center, or summer camp; or (4) a child care aide in a private preschool nursery or day school.

The floating aide is a teacher's aide who helps meet the children's needs in a variety of ways by (1) reducing frustration time during a learning activity; (2) accepting spot assignments to help a child on a given day; (3) listening to a child and giving him immediate satisfaction and motivation; and (4) working with an individual child when the teacher needs to work with the group.

The special aide is one who is assigned to work with the same child each day or on a regular basis.

The special aide for small groups is one who works alone, under the supervision of the teacher, or with the teacher in group activities, such as swimming, art, crafts, and music. She may work with subgroups within the class or activity area that have the same training needs.

The main function of the child care aide who works with mentally retarded children is to assist in behavior modification and behavior shaping. Shaping behavior is a means of teaching an individual to behave in a certain way. It refers to training mentally retarded by use of rewards or positive reinforcement to correct undesirable responses or behaviors.

Regardless of the type of facility, the child care aide is likely to be assigned certain responsibilities in the absence of the professional personnel. Even though she is a sub-professional, the aide will be required to use the same techniques that the professional personnel use although she will be using them in moderation. Before trying something new, therefore, she should consult with the supervisor who can help her do a better job. The supervisor's role is to (1) coordinate the work of many staff members and (2) see that the overall objectives of the program are met.

The following suggestions should be kept in mind as you translate into action the directions of your supervisor. You may find that these suggestions also make your job more satisfying and may lead to promotion.

1. Don't let your supervisor be surprised...
   Make it a rule to keep your supervisor posted on every important matter. (This does not include all the unimportant details.) Remember--nothing is quite so embarrassing to a supervisor as to learn from others what is happening in his department.

2. Admit your mistakes frankly and promptly...
   Go to your supervisor and tell him about the mistake as soon as you discover you made it. It may not be too late to correct it even though it may be difficult for you to admit. Be sure you do not make the same mistake again.

3. Have a recommendation ready...
   If possible, think through the situation, organize the facts you have, and have at least one possible solution to suggest before asking your supervisor for instructions or advice on a problem.

4. If you do not know, admit it...
   Not knowing the answer to a question is not serious--pretending that you know when you do not may lead to trouble. Proceed to find the answer so you will know it the second time.

5. Make it a rule to date everything...
   Everytime you sign your name or initials, date it. If you write a report, take a phone message, or handle any clerical forms, be sure that they are dated. This can be a valuable business habit to form.

6. Do not "pass the buck," grab it...
   This does not mean you must assume responsibility for mistakes that are not yours, but be prompt to "grab the buck" if the blame is even remotely yours. In this way, you earn the respect of your supervisor and others in the organization.

7. Pass along good suggestions...
   If someone else made the suggestion, give him credit for it. This shows that you are a person big enough to share your success and are interested in the ideas of others.

8. Try on the problems of your boss...
   Realize that his responsibilities are many and that he may be struggling with problems that influence his decisions.

Other tasks that the child care aide may be asked to do include:

* Handling certain clerical responsibilities, such as completing forms on the children and their parents, copying confidential information for the files

* Observing, reporting, and recording behavioral changes and special behavior responses of certain children

* Locating specific information in the child's folder

* Transmitting information to professional staff about the child and his parents

* Assisting in evaluating the child's progress toward desired goals

In most cases, the training center maintains a personal folder on each child. If the child care aide is responsible for locating specific information in these folders, it is necessary that she know the importance of keeping any personal information confidential. This means that she should not discuss the information with friends, classmates, fellow workers, or the child's parents. The aide may discuss specific information with the teacher, supervisor, or person to whom she is responsible when it is necessary for her to know more about the child.

The information typically found in a child's folder includes

- family history.
- developmental history of the child.
- educational history of the child.
- medical history of the child.
- test results.
- reports of behavioral changes.
- evaluation records of progress or lack of progress toward goals.

It is important to maintain accumulative information on each child in order to plan his training program more effectively. If you, as the child care aide, are asked to write a report on a parent conference or a report of a child's progress in developing a particular skill, be sure to

- review the points to be covered.
- make notes of any ideas that seem important.
- plan the report carefully.
- evaluate the report realistically and impartially.
- ask the supervisor to review the report with you and give you special help or suggestions in making it meaningful to the professional staff.

Observing and recording clues of the child's behavior is vital to the day-to-day planning for and evaluation of each child. Regardless of the report form used, it is important to stress continuing evaluation of the exceptional child. How does one evaluate a child with mental retardation or one with cerebral palsy, for example? In reporting information to the professional staff, the child care aide should pay careful attention to any changes observed in

- the child's social adjustment
- his physical activity
- his ability to communicate and understand
- his skills in self-care and help-acceptance
- his participation in music and rhythms
- the ways he expresses himself in art activities
- his emotional stability and attention span

Sample report and evaluation forms may be found on pages 114-122 in Gensberg, _Teaching the Mentally Retarded_, and pages 237-241; 250-254 in Perry, _Teaching the Mentally Retarded Child_; others may be provided by the training station.

QUESTIONS:

1. The child care aide is a sub-professional which means that she does not
    a. work directly with the children.
    b. work directly with the professional staff.
    c. have professional training or experience.

2. When working with mentally retarded children in the absence of the supervisor, the child care aide should
    a. try new activities with the children so she can see if they work.
    b. wait until the supervisor returns so she can surprise her and the children with the new activity.
    c. ask the supervisor before trying a new activity with the children.

3. Behavior shaping is
    a. a means of teaching the mentally retarded child to behave in a certain way.
    b. a method of making the child conform to rigid rules.
    c. a way of making the child mind.

4. The supervisor asked Jane to bring her a copy of Suzie's medical record. Jane would most likely get this information from
    a. the doctor.
    b. Suzie's folder.
    c. Suzie's mother.

5. Which of the following items would not be essential in the personal file of each mentally retarded child?
    a. Samples of the child's art work
    b. Test results
    c. Family history of the child
    d. Evaluation reports of the child

ASSIGNMENTS:

I. Make a list of suggestions that will help you to work more effectively with the professional staff in the training station in which you are employed.

II. Observe one of the children at the training station during the lunch period, juice time, music activities, or in the bathroom. Use the sample report forms on pages 250-254 in Perry, Teaching the Mentally Retarded Child, as a guide in evaluating the child's performance, or ask the supervisor at your training station for suggestions for reporting such information.

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UNIT XII-6

THE EXCEPTIONAL CHILD

SUBJECT: That's a No-No!

TASKS: Observes exceptional children for special behavior patterns and responses

Maintains discipline to prevent children from harming themselves and others

OBJECTIVES: Be able to (1) recognize typical behavior patterns of mentally retarded children
(2) compare basic needs of mentally retarded and "normal" children
(3) analyze situations in which behavior shaping techniques are used

REFERENCES: Bensberg, Gerald J. (ed.) Teaching the Mentally Retarded. Atlanta, Georgia: Southern Regional Education Board, 1965. pp. 5-16; 36-37.

Recreation for the Mentally Retarded. Atlanta, Georgia: Southern Regional Education Board, 1964. pp. 20-31.

BEHAVIOR PATTERNS AND BASIC NEEDS

The behavior patterns of children with mental retardation may be viewed in terms of (1) self-care, (2) socialization, and (3) expression. Self-care refers to taking care of personal needs. It includes motor development and development of such skills as eating, bathing, dressing, and toileting. Socialization includes interacting with others, following directions, playing or working in groups, learning to share, making field trips to learn about the environment, and being able to participate acceptably in the group, family, or neighborhood. Expression refers to language development, achievement of inner satisfaction or emotional stability, and release of feelings through music, rhythm, or creative art activities.

Exceptional children, particularly the mentally retarded, often feel insecure because of their handicaps, and they may lack understanding of the environment. They may feel that they do not "belong," and these feelings may be accented by their not being readily accepted by society. These children differ from each other, just as any child is different from other children. One cannot say specifically, for example, that a mentally retarded child will achieve a certain developmental task. Perhaps he will function at a very immature level, even after training, or he may begin to function almost normally in certain aspects of life.

According to present day research, early training increases the chances of success for the mentally retarded. Generally, the mentally retarded child needs more training than the "normal" child. The training, however, must be based on his individual capabilities and levels of achievement. He has the same human needs that all children have, such as love, a sense of belonging, a sense of worth, a chance to express himself, and an opportunity to realize his maximum capability.

This child, probably more than most children, needs the help of the teacher and child care aide to find ways of meeting his needs in social, emotional, physical, and intellectual development. His happiness depends to a great extent upon his relationships with other people. He must develop cooperative habits and attitudes. He needs to be near other individuals his size and developmental level so he can learn to get along with them.

Most mentally retarded individuals have the potential to learn self-care and to adjust socially to their family and neighborhood. Some can learn to perform productive tasks in a sheltered or closely supervised environment. With guidance, many are capable of partial self-direction. Some older mentally retarded individuals are able to develop vocational skills and contribute to their own support. They may perform very simple tasks which do not require speed, alertness, or independent judgment.

In learning to adjust to the world in which he lives, the mentally retarded child develops certain behavior patterns which are annoying and embarrassing to adults. This behavior, sometimes labeled as problem behavior, is often perfectly normal for the mentally retarded child. When studying the behavior of a mentally retarded child, the two terms, adaptive behavior and IQ, should be understood.

Adaptive behavior means the way one copes with the demands of society. It is usually measured in terms of

1. the degree to which the person meets the standards of "personal independence" expected of his age.
2. the degree to which the person meets the standards of "social responsibility" expected of his age.

What is meant by "personal independence"? If the person develops adequate self-care skills and perceptual-motor abilities to maintain himself independently, he is said to be "personally independent." "Social responsibility" indicates how well one gets along with others, his reliability, his trustworthiness, and his ability to strive for long term goals instead of thinking only in terms of immediate pleasures. Adaptive behavior then is measured in terms of how much personal independence and social responsibility one has.

The mentally retarded child usually shows a low measure of adaptive behavior from birth or early childhood. He is not able to cope with his environment in a way that is viewed as normal. His behavior is usually not adequate for his environment.

For example, one may think of the home environment as a simple sheltered one, but for some it can be quite complex. Using knives, forks, and spoons may be simple tasks for the "normal" person, but for a retarded person with a mental age of three years, using knives, forks, and spoons may be a very difficult task.

The behavior of a mentally retarded child should not be judged as typical without taking into consideration his complex environment. The child viewed as mentally retarded in a large city might not be thought of as retarded in a rural setting. His behavior in the city may be inadequate, but his behavior on the farm may be quite adequate and seen by most people as normal. Remember that the difficulty of the environment depends upon the person viewing it. In working with the mentally retarded, one must be careful that he does not view the world from the standpoint of abilities which are expected of all individuals without considering the limitations of the retarded person and his behavior patterns.

Your task as a child care aide may involve helping to change the environment of the retarded child by making it more simple. This may mean placing the child with a group where the demands on him are not so complex. It may involve changing the behavior of the child, that is, teaching him skills which may permit him to adapt more easily. Sometimes it is necessary to do both--simplify the environment so that the child can adjust to it and make the child's behavior more adequate.

The second term *IQ*, is used by almost everyone, but not everyone knows exactly what IQ *is* or how it is determined. IQ is the degree to which a person's level of performance measures below or above that typical of his age group. IQ means intelligence quotient--the mental age divided by the chronological age. *Chronological age* is the person's actual age. *Mental age* is the level at which a person performs. Mental age can be determined in various ways, one of which is intelligence tests. A boy who is actually ten years of age may perform like an average twelve-year-old, or have the mental age of a twelve-year-old. No matter what his chronological age, if he performs like an average twelve-year-old, his mental age is twelve years old. If he performs like an average six-year-old, however, his mental age is six years.

Now that you know the chronological age is simply the person's actual age and that mental age is the level at which he performs, here is a formula for arriving at the IQ:

$$IQ = \frac{\text{MA (mental age)}}{\text{CA (chronological age)}} \times 100$$

Multiplying by 100 just makes the figures easier to read because it takes away the decimal point.

Using this formula, what is the IQ of a 12-year-old boy whose intelligence test shows he performs like an average 6-year-old?

$$IQ = \frac{6}{12} \times 100 = 50$$

Yes, you are right. His IQ is 50.

A common misconception is that only the mentally retarded who are considered educable or trainable have potential for improvement. With an IQ of 50 to 75, the "educable" can be taught some academic and social skills and frequently may be prepared for employment. The "trainable," who has an IQ of 25 or 50, can be taught many of these skills to a lesser degree. What about the retarded with IQ's of less than 25--those who are considered severely and profoundly retarded? The severely retarded person who has not even developed self-care skills is often viewed as "untrainable" or "hopeless," however, he usually can improve in certain areas of development.

One must keep in mind, therefore, the extent of the retarded individual's impairment when setting standards for his behavior and not expect him to act like a mature adult. The normal child gradually takes on the behavior of an adult, acquiring new mental and physical abilities as he grows older. The retarded child, even one who is mildly retarded, advances only to the mental age level of a ten or twelve-year-old. If he is severely retarded, he may not advance beyond the level of a nine-month-old baby. Many times, although the physical body of such a child can be trained past the level of nine months, he will still have the mental ability of a baby.

One must attempt to teach these "children" skills and social graces that will make them more like normal adults. Society expects them to eat with the proper utensils and cope with toys designed for normal children. Too often bound by adult standards, one expects retarded individuals to react to an environment designed for normal adults or normal children. An aide who is new in working in the field of retardation may be deceived into expecting the retarded child to behave in a manner beyond his abilities.

The child care aide must remind herself constantly that the retarded individual is going to be childlike and that his behavior, including his judgment, reasoning, abstract thinking, social graces, and even his physical skills will not be proportionate to his physical size.

QUESTIONS:

1. Name and briefly describe three basic terms used in relation to the behavior patterns of mentally retarded children.
   a.
   b.
   c.

2. Define the following terms:
   a. adaptive behavior
   b. IQ
   c. chronological age
   d. mental age

3. The IQ of a mentally retarded child is
   a. higher than for a "normal" child.
   b. about the same as a "normal" child.
   c. lower than for a "normal" child.

4. The mental age of a mentally retarded child is
   a. about the same as his chronological age.
   b. below that of his chronological age.
   c. above that of his chronological age.

5. Johnny is 18 years old, but he has the mental age of a 9-year-old. His IQ is approximately
   a. 25.
   b. 50.
   c. 75.

6. The human needs of children are (similar to, different from) ______________ those of other children. ___________

7. Mentally retarded children
   a. go through similar developmental stages but at a slower rate than other children.
   b. go through similar developmental stages but at a faster rate than other children.
   c. do not go through similar developmental stages since they are not able to learn in the same way.

8. Mentally retarded children (are, are not) ______________ slow in learning to cope with their environment.

9. Mentally retarded children (do, do not) ______________ learn self-care skills proportionate to their mental age.

10. Mentally retarded children (do, do not) ______________ develop social skills proportionate to their physical size.

ASSIGNMENT:

I. Review Bensberg, Teaching the Mentally Retarded, pp. 5-17 and Recreation for the Mentally Retarded, pp. 20-27 on typical skills of children at different ages.

a. Outline some of the skills and abilities that are expected at each level from 6 months to 12 years.
b. Since mentally retarded children are known to have a maximum mental age of a 12-year-old, how will this outline help you in knowing how to work with mentally retarded children?

II. Briefly summarize Bensberg's guidelines for the child care aide working with young or severely retarded children in an institutional setting as given on pages 36-37, Bensberg, Teaching the Mentally Retarded. How will knowing these guidelines help you to meet individual needs of these children?

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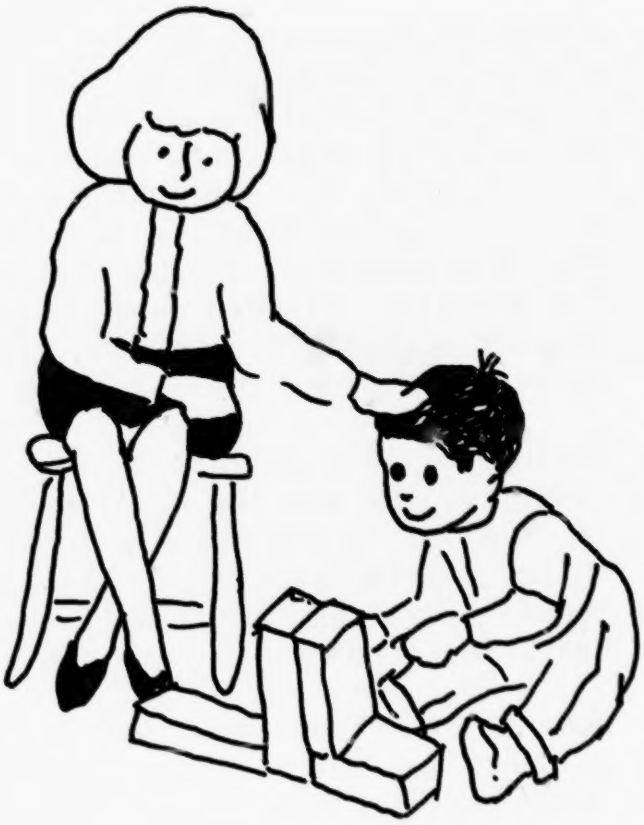
DISCIPLINE AND BEHAVIOR SHAPING TECHNIQUES



REFERENCE: Bensberg, Gerald J. Teaching the Mentally Retarded. Atlanta, Georgia: Southern Regional Education Board, 1965. pp. 127-141.

What is discipline? The answers are many. To some, discipline means to govern, to keep in line, to regulate; to others, it means a strict way of life from which one must never deviate. For additional suggestions on disciplining and guiding children's behavior, refer to Unit IV-4, Oh, Boy, Here We Go Again! on pages A-69 to A-80.

Some basic ideas to remember are (1) children are more easily guided and disciplined if they have the idea that adults are friendly helpers rather than punishers and (2) all children need love and praise as much as they need food, clothing, and shelter. The mentally retarded child needs essentially the same kind of guidance and discipline as any other child his same mental age and ability level.

Knowing what children are like at different stages of growth can help one avoid trouble that frequently results from expecting too much of them too soon. Can a mentally retarded child be expected to stop playing with the toys and put them away the minute he is asked to do so? More than likely he will want to keep on playing.

To understand what lies behind a child's behavior, one must be alert to his feelings as well as his actions. For example, Johnny does not know why he is stubborn. Yet the clues he gives are meaningful. One way to understand the child is to listen to him. The reasons for his behavior are often endless. Remember, everything a child does has some meaning and expresses some inner need or combination of needs.

It is helpful if the child care aide can learn to anticipate what the child is likely to do in a given situation. She can then divert him away from trouble by substituting some activity that will occupy him. Through this redirection, a child also learns that the aide disapproves of what he wanted to do in the first place.

Make as few rules as possible for the mentally retarded child, but be firm, consistent, and fair with the rules that are made. This does not mean that rules cannot be changed or relaxed from time to time as the occasion arises.

Remember, if a command is given, be sure it can be enforced. It is much better to keep the "don'ts" to a minimum.

There are times when the child care aide must interrupt the child's behavior, since children have to be controlled to prevent injury. A situation that involves physical danger must be dealt with quickly. It is very important that a child understand what this means. The dangerous situations are relatively clear; the subtle ones may be most confusing. For example, if Johnny starts to hit another child with a block, waste no time removing the block from his hand. At the same time, try to redirect him to other things to do. The mentally retarded child gradually learns, in this way, that his action was not acceptable. Knowing right from wrong must be developed within the mentally retarded child in much the same way that it is with any other child.

Because of this child's limited vocabulary, the aide should select words carefully and use the same ones constantly to describe right from wrong in relation to the child's behavior. Such words as "good", "fine", or "nice" may be associated with appropriate behavior. In time the young mentally retarded child will learn that his behavior is all right when he hears these words.

When it is evident that the child's understanding is increasing, further guidance may be given through verbal explanations, still using simple words that are familiar to the child. Keep these explanations brief and simple so that the mentally retarded child can grasp the meaning.

Facial gestures and expressions will help to make explanations more meaningful to this child. A smile and a pat of approval with the words "good" or "fine" reinforce the child's learning and tell him that his behavior is acceptable. On the other hand, the child knows that he is doing something wrong when he observes the aide's non-verbal expressions, such as frowning, shaking the head, restraining the child's body, holding his hand, or slightly slapping his wrist at the same time that the words "naughty" or "bad" are said.

Do not expect the mentally retarded child to remember these behavior shaping experiences at first. They learn slowly and forget quickly. For this reason, consistency and repetition are essential elements in guiding the behavior of the mentally retarded child.

ABC'S OF GUIDANCE[1]

A Attention span

The attention span of mentally retarded children is very short, therefore, begin new activities when interest lags. Do not keep the activity going until the children lose interest. Activities involving physical or mental skills should be used at the beginning of the day's schedule and should be interspersed with free activity periods.

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[1] Adapted from: Recreation for the Mentally Retarded. Atlanta, Georgia: Southern Regional Education Board, 1964. pp. 32-40.

B Break activities down

When teaching the more complex games or skills, break them down into small sections or parts. Teach simple, easy tasks first, gradually moving on to the more difficult as the performance of the children demands. Progress may be very slow, but be patient!

C Competition

Mentally retarded children generally do better in games or activities involving team effort with limited individual competition. In most cases, they are really seeking approval. It is hard, therefore, for them to accept defeat or to learn to share. Be liberal with praise, reinforcing successful achievement. Stress cooperation rather than competition.

D Drill

Repetition, practice, and imitation are necessary in the learning process of the mentally retarded. Short frequent practice sessions each day usually prove more effective and help to reinforce learning of skills. Repeat directions carefully and often.

E Evaluation

Keep complete and accurate records of the progress of each child. Continuous evaluation is essential in determining progress made by the mentally retarded or otherwise impaired individual. The child care aide can be extremely helpful in this overall evaluation process. Such records can also be a clue to teaching and guidance methods which are not successful with certain children.

F Free activities

Most activities are structured for the mentally retarded so that the aide or teacher can determine how much each child understands and participates. These children may be given a choice of activities only when they are capable of making a choice. During the time of free activity, therefore, these children need play materials and equipment which can be manipulated with a minimum of guidance. When working with older mentally retarded individuals, the aide should encourage the development of self-directive leisure time activities.

G Groups

It is very important that these children have opportunities for group activities to help develop social skills. Activities allowing the children to participate in pairs, partners, or teams help them learn to share both success and responsibility.

H Happiness

Since teaching situations are usually informal, the aide can easily communicate attitudes or feelings which are either positive or negative. Happiness is a necessary element in the learning environment of the mentally retarded child. These children are usually friendly and affectionate. The happy attitude of the aide may in turn be reflected in the ability of the children to perform successfully since happiness indicates acceptance and approval to these children.

I Instruction

Keep instructions as simple and as brief as possible. Repeat the information as needed until the children are able to carry through the activity. Use the same tone of voice and the same gestures each time. Consistency in the tone of voice and in actions will reinforce learning and reduce confusion.

J Judgment

Use plenty of judgment and common sense when working with the mentally retarded. Use ideas that offer a challenge and motivate these children for learning. Realistic goals supported by appropriate incentive measures tend to heighten the performance and result in improvement of the children's behavior.

K Know the children as individuals

Talk with the children and, most of all, listen to what they are saying so that you can begin to interpret their needs and guide them to more profitable learning experiences.

L Limelight

Give the children every opportunity to be in the limelight. Try to provide opportunities for them to gain recognition, not just for the sake of winning, but to help them develop a feeling of self-esteem.

M Modification

Help the children modify undesirable behavior patterns, adapting behavior to make it socially acceptable. An understanding of "normal" children helps the aide to recognize that the retarded child's rate of maturation is slower and that the guidance techniques must include more positive reinforcement.

N Needs

The needs of mentally retarded children are basically the same as the needs of other children. Be sure to study Unit II on the basic needs and principles of development of children.

O Organize

Keep a jump ahead. Be in control of every situation. Be firm, but kind. Make sure these children do what you say. Be versatile and ready for anything.

P Participation

Keep alert to see that everyone participates. Keep a close watch for signs of exhaustion when physical learning activities are in progress.

Q Quiet play

Plan for short periods of quiet play during the day since some of these children may have reduced vitality, or they may be hyperactive and need to be isolated in a quiet environment for short periods of time.

R Reward or reinforce

Help to shape behavior with positive reinforcement, rewarding mentally retarded children immediately when they successfully accomplish what they were asked to do. Rewards may include such things as a pat on the head, a smile, verbal praise, food, juice, candies, and small toys. These are not used as bribes before the child's achievement, but are given immediately after to motivate and reinforce learning. Rewards may be reduced gradually as learning takes place. The aide should learn the type of reward that is most effective with a particular child and use the same means of positive reinforcement each time.

S Safety

Mentally retarded children do not have a sense of danger. The child care aide must develop an awareness of possible dangers and take precautions to safeguard against them.

T Tension

These children become very tense in trying to achieve. They generally do their best the first few times they perform an activity or task. Do not allow them to continue under stress since their coordination will tend to decrease.

U Urgency

As with "normal" children, mentally retarded children have a great desire to "get on" with the activity. Be sure to keep the objectives of the activity in mind so that it accomplishes its purpose for that particular child. Remember activities are planned with a purpose and are not meant only to keep the child busy and entertained.

V Variety

Have a variety of activities available and be able to present each in a number of different ways. Try crafts and activities involving rhythm, story-telling, and singing to allow the children a means of expressing themselves and releasing tensions and frustration. Plan ahead; do not depend on thinking of something at the time. Be sure the equipment and supplies are available or know what can be substituted to complete the activity. Inject familiar activities to insure a feeling of security and accomplishment if the new activity does not go very well.

W Widen the child's world

Make the small world of these children a better place in which to live. Provide love, security, and hope in every possible situation. Help them know and understand the environment through varied activities that teach them about the wonders of the universe.

X "X" marks the spot

Designating places for the children by marking circles or spots on the floor or ground or tying a rope around the area may help them feel more secure in certain activities and will help when setting boundary limits. Define limits clearly so that the children understand areas that are "out of bounds."

Y You

You, the child care aide, are very important to the children. What you are and what you do will have more effect than what you say. Understanding yourself and admitting your strengths and weaknesses will help you work with these individuals.

Z Zeal and zest

Your zeal and zest determine your success or failure as a child care aide working with mentally retarded children. An enthusiastic attitude helps you in working with the children, their parents, and other employees at the training station.

QUESTIONS:

1. Positive reinforcements are
   a. rewards used in behavior shaping.
   b. habits formed by mentally retarded children.
   c. ways of punishing children for undesirable behavior.

2. What are three types of positive reinforcements?
   a.
   b.
   c.

3. If punishment is necessary, it should be administered to the mentally retarded child
   a. at the beginning of the undesirable act.
   b. during the undesirable act.
   c. before the child does the same thing again.

4. If you have been trying to teach Jimmy to pull up his pants after toileting and he suddenly does it without being asked, you
   a. do not reward him because this was not an immediate response to training.
   b. reward him as quickly as possible.
   c. wait to see if he does it again on his next trip to the bathroom.

5. If Billy hits the child care aide, she should
   a. make a game of it to distract his attention.
   b. scold him so that he knows she noticed what he did.
   c. ignore his behavior to keep from reinforcing undesired learning.

6. If Kay begins throwing all the toys at the other children, the child care aide should
   a. give her extra attention.
   b. ignore her so she will recognize her bad behavior.
   c. remove her from the play area as quietly as possible.

7. What is an important principle to remember about behavior patterns which are to be reinforced?

8. In teaching the mentally retarded child to put on his coat, it is best to
   a. teach one step at a time, rewarding him for each step that he learns.
   b. teach him one step at a time, rewarding him after the first few steps.
   c. teach him the entire sequence of steps before rewarding him.

9. Joey was buttoning his shirt without help for the first time. Gale, the child care aide, was frowning when she said, "Good boy, Joey." How will her attitude affect Joey's learning the skill?
   a. Joey will accept what she says without noticing her facial expression and continue buttoning his shirt.
   b. Joey will interpret her frown as disapproving and be hesitant to repeat the act.
   c. Since Joey's attention span is short, he will remember only what she said and will expect her to say it again the next time he buttons his shirt.

Home Economics
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UNIT XII-7

THE EXCEPTIONAL CHILD

SUBJECT: Let's Try It This Way!

TASKS: Assists exceptional children in activities involving motor control, motor coordination, and perceptual motor training

Guides exceptional children in activities involving mental abilities and intellectual-emotional development

OBJECTIVES: Be able to (1) select active games and exercises to help in the physical and motor development of mentally retarded children
(2) plan art and craft activities suitable for mentally retarded children
(3) list reasons for action stories and music activities
(4) suggest ways to develop perceptual skills

REFERENCE: __________. Recreation and Physical Activity for the Mentally Retarded. Washington, D.C.: American Association for Health, Physical Education, and Recreation. 1966. pp. 14-22; 34-61.

Before beginning this unit, it is recommended that you study the following units concerning the value of play, types of play and play activities, story telling, dramatics, music activities, play equipment, games, and science and nature activities:

Unit VI Children's Play: A Learning Experience
Unit VII Books and Music for Children
Unit VIII Toys and Games for Children
Unit IX Nature and Science Experiences

These units should serve as a basis for planning similar activities for mentally retarded children. The play needs and interests of these children are similar to those of "normal" children except that they differ in degree and method of expression as a result of slower rate of motor development. The same activities may be used with appropriate modifications for children within the entire range of mental retardation. Any modifications, however, should be consistent with the physical, mental, social, and emotional needs of children within the group. This may mean only that the rules are simplified and made more specific, or that the boundary limits are made smaller.

On the other hand, modifications may involve other kinds of play materials to complete the activity.

MOTOR SKILL ACTIVITIES

Motor skill activities are designed to contribute to the development of body balance, coordination, speed, accuracy, strength, and agility. They may be performed individually as self-testing activities or as group work in circles or range formations. Use judgment as to which activities are suitable for each mentally retarded child.

Some exercises and games are given in this unit to aid in planning activities which help to develop motor skills. Additional information may be found in Unit VIII, Toys and Games for Children, and in the following references:

Perry, Natalie. Teaching the Mentally Retarded. New York, New York: Columbia University Press. 1962. pp. 50-57.

_________. Recreation for the Mentally Retarded. Atlanta, Georgia: Southern Regional Education Board. 1965. pp. 44-88.

Exercises

All-Four Walk: Bend over and place hands on floor. Walk forward on hands and feet.

Bear Walk: Bend forward and touch ground with both hands. Travel forward by moving the right arm and right leg simultaneously and then the left arm and left leg simultaneously.

Elephant Walk: Bend forward and touch the ground with both hands, keeping knees and elbows stiff and hip elevated. Walk forward.

Lame Dog Walk: Walk on hands and one foot with other leg held high, imitating a dog with a sore foot.

Frog Jump: From squat position with hands on floor between legs, travel forward by leaping forward to hands, bringing legs up to squat position. Hands are placed well in front of body after each jump.

Crab Walk: From a squat position, reach backward and put hands flat on floor without sitting down. Walk in direction of feet, keeping head and body in a straight line.

Measuring Worm: Support body on hands and feet with legs extended backward. Keeping hands in place and knees stiff, walk on toes with short steps until feet are near hands. Then, keeping feet in place, walk forward with hands with short steps until original position is attained.

Duck Waddle: Assume knee bent position, hands on hips. Retaining this position, walk forward.

Chicken Walk: Assume a squatting position, feet together, knees apart. Grasp ankle (left hand on left ankle, right hand on right ankle). Retaining this position, walk forward.

Indian Walk: Bend knees slightly, bend trunk forward, arms hanging down until back of hands touch ground. Retaining this position, walk forward.

Walk on Toes: Walk forward on toes.

Giant Step Walk: Walk forward, making each step as long as possible.

Fast Walk: Walk forward at a fast pace, swinging arms vigorously (avoid running).

Knee Raise Walk: Walk forward raising the bent knee of advancing leg as high as possible on each step. Make each step broad by extending leg forward.

Kick Run: Run forward, kicking foot of the advancing leg upward as high as possible on each step.

Hop-on-Left Foot: Holding right foot in left hand behind buttocks, travel forward by hopping on left foot.

Broad Jump: Travel forward by means of a series of broad jumps off both feet.

Stiff Knee Jumps: Holding knees stiff travel forward by means of continuous short jumps.

Hop Steps: Travel forward by means of a series of hops and steps. Stop on left foot, hop on left foot; stop on right foot, hop on right foot, etc.

Games

King's Guard: A basketball or volleyball and a chair or stool are needed. This should be played in gymnasium or out of doors. All the children form a circle about thirty to fifty feet in diameter with two children and a stool or chair in the center of the circle. Appoint one of the two as the king and another as a guard. The king sits on the chair and the guard stands beside the chair. The players in the circle have a volleyball or a basketball. At a signal, the players in the circle throw the ball at the king. The guard attempts to stop the ball from hitting the king. He may bat the ball but cannot catch it. The players may enter the circle to retrieve the ball, but they must make all the throws outside the circle. When the guard tags any player inside the circle, that player becomes the king and the king becomes the guard.

Capture the Flag: Two objects for flags are needed for this game. The children are divided into two teams each having half of the playing field as their territory. At a place within the playing field of each team, a flag is planted for them to guard. The idea of the game is to capture the other team's flag and get back without being caught. Several players on each team are appointed to guard the flag. There is an area around each team's flag that is safe territory for members of the opposing team. If a member of one of the teams manages to get the opposing flag, he is safe until he wants to make a run for his own territory with the opposing flag and thus wins the game for his side. If a person is caught, he joins the team that caught him.

Midnight: No equipment is needed. Use five to thirty or more players. One player is the fox and all others are the sheep. The game starts with the fox leaving the den. The sheep leave from behind a goal and approach the fox asking him, "What time is it?" He may answer any hour he wishes, but if he answers "midnight" they must run to the sheepfold before the fox catches them. Any sheep caught changes places with the fox.

Tunnel Race: No equipment is necessary. The players form two or more lines which will compete with each other. The teams should consist of an even number of players--on the word "go," the last man in line begins crawling through the legs of the players who are standing in line. The next to the last player follows right behind the last man and this is continued until all players are in original positions. As soon as a player has gone through he stands at the front in a stride position.

Variation: After everyone has gone between the legs of the members of the team, the race can continue by having players go over the top of each player or "leap frog" over each member of the team.

Johnny, May We Cross Your Golden River: No equipment is needed. This game is played by the entire group, with one person being "it." The game is played with boundary lines on each side. The person who is chosen to be "it" will stand in the center of the square which is represented by the four boundary lines, with his back to the entire class which will be lined up along boundary lines. The class in unison will say "Johnny, may we cross your golden river?" Johnny (center player) will say, "Yes, if you are wearing ________. (Johnny names a certain color--red, for example.) All the children wearing that color can walk across safely, while the children not wearing this color will run to the other side. The object for those who must run across is not to get tagged by "Johnny" before reaching the other side. Whoever is tagged will be "it" and will take Johnny's place in the center. Then the class will call the child's name and proceed as they did before.

Little Lost Chicken: All students except two remain in their seats. One of the two students is "it" and leaves the room. The other student guards the door and picks someone to be the "little lost chicken." The student who is "it" is called back into the room and says, "Where is my little lost chicken?" The person who is the little lost chicken answers, "Peep, Peep." The other students remain perfectly quiet with their hands over their mouth. The "little lost chicken" has his hand over his mouth too, and tries to disguise his voice. The one who is "it" is allowed three guesses. If he guesses the right person, the little lost chicken becomes it and the old "it" becomes the door guard and chooses another player for "little lost chicken." If he fails to guess the right person in three guesses, he remains "it" and another lost chicken is chosen.

ART AND CRAFT ACTIVITIES

The mentally retarded child often has difficulty expressing himself through language. Thus, the use of art and craft activities is necessary to (1) help him release tensions and emotions that he would be unable to release otherwise and (2) enable him to build self-respect through a feeling of accomplishment and success in his work.

Suggestions for art and craft activities for the mentally retarded are found in the following references:

Perry, Natalie. Teaching the Mentally Retarded Child. New York, New York: Columbia University Press. 1962. pp. 81-89; 161-196.

_________. Recreation for Mentally Retarded. Atlanta, Georgia: Southern Regional Education Board. 1965. pp. 130-165.

Additional activities that can be adapted to teaching the mentally retarded are:

Balloon craft - inflate balloon, cover with papier-maché
Bead craft - string beads, glue beads
Block printing - use raw carrots or potatoes with cut out design
Box craft - make toys from cereal, cracker, or cigar boxes
Button art - string buttons or glue buttons on construction paper
Cardboard toys - cut out cardboard toys
Clay modeling - use modeling clay
Crayon drawing - use colored crayon on newsprint or wrapping paper
Fall leaf art - use leaves to make pattern or glue on paper in pattern
Finger painting - use newsprint or butcher paper and water base paints
Felt art - cut out designs in felt
Greeting card art - cut out greeting card or make cards
Holiday crafts - make Christmas tree, Easter basket, Thanksgiving turkey, May basket

Hand puppets - make out of felt, paper, cloth, socks
Ink art - drop ink on paper and fold, or drop ink on paper and use straw to blow design
Insert colored pegs in pegboard - make designs
Macaroni craft - color macaroni and glue on paper or boxes, string for beads
Paper bag hats - decorate with bits of paper, leaves, buttons
Paper carton craft - use milk carton, egg carton
Paper cutting - cut designs from folded paper
Paper doilies craft - fold or use flat
Paper dolls - make cut outs
Paper flowers - use tissue paper or crepe paper
Pasting pictures - cut out colored pictures or construction paper
Pipe cleaners craft - bend to make animals or design
Seed art - glue seed on paper or cardboard
Sewing card art - use perforated cards to sew designs using colored yarns
Spatter painting - use screen, tooth brush, and finger paint
Spool craft - string spools and construct toys or animals; dip spools in poster paint
Sponge art - dip sponge in poster paint to make design
String painting - dip string into poster paint and make designs on paper, glue colored yarn on paper
Foil craft - crush foil to make objects
Tinker Toy craft - make designs by using tinker toys

STORY TIME

If you are assigned the job of telling and dramatizing stories for mentally retarded children, study Unit VII-1, Tell Me A Story, in addition to this unit.

Story time is a very important time for mentally retarded children. It is often a good idea to read or tell stories in small groups or to individual children. In this way, the child care aide and the children are brought closer together. Learning can then involve touch as well as speech. Remember that stories for exceptional children are short, contain familiar characters and events, and require little imagination.

Action stories can be used with mentally retarded children to (1) stimulate interest, (2) motivate learning, (3) release pent-up feelings, (4) soothe fears and anxieties, and (5) entertain. Pictures on flannelgraphs should be used generously during the story. The children should be given a chance to participate, and the stories should be repeated often so that the children can help tell them.

DRAMATIZING A STORY

Mentally retarded children also like to dramatize stories. The child care aide should first read a story to the children that they know well. After she and the children talk about the characters in the story, the child care aide might say, "Sometimes we like to tell a story in a different way. It is fun to "be" the people and animals in the story. For example, let's think of all the characters we need in order to tell the story of the Three Bears. By looking at these pictures, we can see what each character is like. Here is Father Bear. Tell us about him. How would his voice sound? How would he move?"

Choose children to take the parts of characters. Ask questions which will stimulate and clarify action; let children act out stories with spontaneous conversation and self-expression. Some questions on the Three Bears might be:

1. What furniture will be needed in the three bears' home?
2. Mother Bear must cook the porridge. Where will the kitchen be?
3. Where shall we put the chairs?
4. Where should the bedroom be?
5. How could we make the stairs?
6. What could we use for beds?

Evaluation might be made as follows:

How did John show us that he was Baby Bear? How did Mother Bear comfort Baby Bear when he discovered his chair was broken? Wasn't she a good Mother Bear? What did she do after she set the tale? How did Daddy Bear show us how big he was? What else could Daddy Bear do to show us that he is very round and fat? Did everyone who took part in the play have fun? How did each person help?

Children usually progress and improve in their ability to dramatize a story and like to dramatize the same story over and over.

Examples of other stories to be dramatized are:

The Fidgit Family[1]

Pa Fidgit
Ma Fidgit
Grandpa Fidgit
Grandma Fidgit
Johnnie
Sammie
Maggie
Bridgit
The Twins
Baby
Old Moll
Old Doll
Wagon
Pocketbook
House

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[1] Franklin, C.C. Diversified Games and Activities of Low Organization for Mentally Retarded Children. Carbondale, Illinois: Southern Illinois University, pp. 14-15.

Name each person as one of the characters (a person can be more than one if there are not enough people to play all parts). As each name is called in the story, the person rises, turns around, and sits down again. When "Fidgit Family" is mentioned, everyone gets up and turns around.

Once upon a time there was a family by the name of Fidgit. There was Pa Fidgit, Ma Fidgit, Johnnie Fidgit, Maggie Fidgit, Bridgit Fidgit, Sammie Fidgit, the Twins, and Baby Fidgit.

One day Pa Fidgit said to Ma Fidgit, "Suppose we hitch Old Moll and Old Doll to the wagon and spend the night at Grandpa and Grandma Fidgit's." Ma said, "All right." She got Johnnie and Sammie, Maggie and Bridgit, and the Twins and Baby Fidgit all ready while Pa Fidgit hitched Old Doll and Old Moll to the wagon, so all could go to Grandpa and Grandma Fidgit's house.

Pa Fidgit drove the wagon with Old Doll and Old Moll around to the front of the house, and Johnnie and Sammie and Maggie and Bridgit all ran out to the wagon and got in. Then Ma Fidgit came out with the Baby and got into the wagon. Pa Fidgit started up Old Doll and Old Moll and the wagon and away they went to the house of Grandpa and Grandma Fidgit. But in the rush Ma Fidgit forgot the Twins and her pocketbook, so Pa Fidgit stopped Old Moll and Old Doll and the wagon and sent Sammie and Johnnie back to where the Twins were sitting by the side of the house. Sammie and Johnnie made the Twins run and get into the wagon and then got Ma Fidgit's pocketbook. Pa Fidgit started Old Doll and Old Moll and the wagon again and they were on the way to Grandpa and Grandma Fidgit's house.

When they got there, Sammie and Maggie and Bridgit Fidgit and the Twins all jumped out of the wagon and Ma Fidgit, with Baby Fidgit on one arm and her pocketbook on the other, got out. There were Grandma and Grandpa Fidgit running from the house to greet them. Grandpa Fidgit helped Pa Fidgit unhitch Old Moll and Old Doll from the wagon. Then Grandma Fidgit went with Ma Fidgit up the walk to the house carrying Baby Fidgit and the pocketbook, and there was Sammie, Maggie, Johnnie, and Bridgit running up to the house with the Twins bringing up the rear. When Grandpa and Pa Fidgit came from unhitching Old Doll and Old Moll from the wagon, Grandma Fidgit had dinner ready and the whole Fidgit Family had a wonderful time at the dinner at Grandpa and Grandma Fidgit's house. That was the end to a Perfect Day.

Clappertown

In Clappertown everyone claps when the words "Doctor" and "Drake" are mentioned. If they are mentioned together, they clap twice. They are careful not to clap at any other time.

"The epizoodic is what's wrong with you," said the doctor (clap once).

"What will I do?" asked the duck.

"There is only one doctor (clap once) that can cure you," answered the doctor (clap once).

"And who is that?" asked the duck.

"Doctor Drake. (clap twice) Yes, Doctor Drake (clap twice) is the great epizoodic specialist. You'd better go to Doctor Drake (clap twice)."

So the duck hurried to Doctor Drake (clap twice) and Doctor Drake (clap twice) cured him.

MUSIC ACTIVITIES

Music is particularly valuable in training mentally retarded children. They love music and most of them respond naturally to it by rocking, stamping their feet, clapping, or jumping. Simple repetitive songs bring immediate enjoyment.

Just as action stories hold their interest, so do action songs. Many of these also help to develop the small muscles in their fingers and hands. Others involve marching, hopping, and walking on tiptoe, which helps to build large muscles and improve coordination. Music can also help in language development since words which with they have difficulty may be learned in a song.

For those unable to join in action songs, a rhythm band is a good activity. Rhythm bands also help to develop muscles and improve coordination.

Be sure to study Unit VII-2, Sing Me a Song for additional information about music activities for children. Other music activities may be found in the following references:

Perry, Natalie. Teaching the Mentally Retarded Child. New York, New York: Columbia University Press. 1962. pp. 90-105.

__________. Recreation for the Mentally Retarded. Atlanta, Georgia: Southern Regional Education Board. 1965. pp. 92-109.

A list of suggested songs for use with mentally retarded children might include:

Pop Goes the Weasel
She'll Be Coming Around the Mountain
Old MacDonald Had a Farm
The More We Get Together
Down at the Station
I'm a Little Teapot
Row, Row Your Boat
Three Blind Mice
I'm Pop-Eye, the Sailor Man
Eency Weency Spider
Little Duck Song
Mary Had a Little Lamb
Did You Ever See a Lassie
London Bridge Is Falling Down
Here We Go Around the Mulberry Bush
Sing a Song of Sixpence
Ten Little Indian Boys
Rudolph, the Red Nose Reindeer
Here Comes Peter Cotton Tail
Happy Birthday

UNDERSTANDING THE ENVIRONMENT

Experiences involving perceptual skills are important to the mentally retarded child because they help the child to (1) gain an appreciation of himself and the world around him, (2) keep alive his sense of wonder, (3) understand the orderliness of the universe, and (4) develop his ability to think and find answers to questions. This child must be able to respond to sensory stimulation in order to develop adequate concepts of himself and his environment.

The mentally retarded child feels more secure when he knows something about space, time, and body image. If he is confused about himself and disoriented in time and space, he is usually an anxious, unhappy child and unable to adjust to his surroundings. As he comes to understand himself, he is likely to gain confidence and be able to function more effectively. When the mentally retarded child becomes more aware of form and size, he improves his self-care skills in placing objects, setting the table, or buttoning his clothes. As he develops motor skills, he can put on his coat or walk up stairs more easily. As his auditory perception improves, he can understand and respond to directions which are given to him.

The more skills the child can develop and use in acquainting himself with the physical world, the more readily he will understand it. The more knowledge he has about his environment, the better prepared he is for living. He will be able to respond to situations involving danger. He can get along better with others.

By seeing himself in the mirror, hearing himself talk or make sounds, and touching different parts of his own body, the mentally retarded child begins to perceive his own body image and gains a better concept of himself. In developing a concept of space, he needs to know not only who he is, but where he is. Through playing with blocks, balls, and educational toys, he can learn about space. He can also learn about space by moving about in active games, exploring the center, or taking trips in the community. The concept of time can be taught (1) by using rhythm and music activities and (2) by setting time limits in certain other activities.

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Here are a few suggestions to remember when guiding a child in activities that help him develop perceptual skills.

1. Moving
   The mentally retarded child can be motivated to improve his perception through pull toys, balloons, balls, or tops. Movements in toys can also distract a child from working with them. A child may be given a toy wagon for the purpose of matching colored pegs in colored holes. If it moves back and forth, however, it may detract from his focusing attention on the pegs. Some educational toys may be improved for use with mentally retarded children by removing wheels or movable parts.

2. Building
   The mentally retarded child will learn the concept of size better if he is allowed to handle a "big" block and a "little" block. He needs a chance to do something with the blocks in order to accomplish desired learnings. He can stack them, sort them into piles, or hug them.

3. Coloring
   The mentally retarded child is likely to respond to color more readily than to abstract form, since he often learns color first. For example, a child learns a ball is red before he learns the ball is round. The child may be able to sort colored pegs before he recognizes the shape of pegs.

4. Sorting
   It is very important to present one characteristic form at a time. It will confuse the child if several shapes and colors are presented at the same time. When teaching shapes of objects or two particular shapes such as a cube and a sphere, the color should be the same. They should be the same texture and approximately the same size.

   When helping a child to understand sorting, it is good to begin with familiar objects, such as silverware. Have the child sort the spoons and knives. He learns to sort them by shape. Later substitute colored plastic spoons and knives to introduce color. After sorting red spoons from yellow knives, the child may be able to sort red blocks from yellow blocks. Through the process of sorting by form and color, he begins to learn the sorting process.

5. Comparing
   If the child is shown blue balls all the time, he may think that he plays with blue rather than a ball. He can learn color contrast if he is shown a blue ball and a yellow ball at the same time.

6. Naming
   The mentally retarded child will have trouble attaching names to colors or shapes of objects. A step between teaching simple sorting and naming

the object is matching. A child probably will be able to follow the direction, "Point to the red one," before he can answer the question, "What color is this?"

It will take longer for the mentally retarded child to understand his environment in the way that most normal children do. A child care aide who reminds herself that the child may not see things as she does will be able to give the child better training. She will understand that to a child a flat picture of a ball may not be the same object as the ball itself. She will also understand that a profile of a man may give a child the impression that the man has just one eye.

When some children look at a silhouette of a circle, they may confuse the background with the foreground. They may see a square with a hole in it, rather than a circle. The child care aide should mount colored objects on subdued backgrounds to help the child develop better perception.

For a list of activities directed primarily at increasing sensory perceptual skills and certain kinds of concept formation, see the following references:

Perry, Natalie. Teaching the Mentally Retarded Child. New York, New York: Columbia University Press. 1962. pp. 139-158; 208-219.

_________. Recreation for the Mentally Retarded. Atlanta, Georgia: Southern Regional Education Board. 1965. pp. 112-126.

You will want to study Unit IX, Nature and Science Experiences in addition to this unit.

QUESTIONS:

Leta is observing the children at the day activity center in order to identify the purpose of each activity. Can you help her by matching the correct purpose with each situation in questions 1-4?

1. Three children play "leap frog."
2. Betty claps and walks in step to the music.
3. Jessie strings beads while Bob is finger painting.
4. Phoebe, Connie, and Bob go for a walk with the child care aide.

PURPOSE

A. To learn academic skills
B. To develop body balance and coordination of large muscles
C. To release tension
D. To find out about the environment
E. To develop sense of rhythm

ASSIGNMENT:

I. Review the eight important considerations for planning activities to meet the special needs of mentally retarded children as given on pages 34-38 in Recreation and Physical Activity for the Mentally Retarded. Briefly summarize these suggestions in your own words. Which of these could you apply in your work with children?

II. Using guidelines given in the references and in this unit,
   a. plan at least one each of the following types of activities which you can use with the mentally retarded children at your training station:
      (1) motor skill activities
      (2) art and craft activities
      (3) story telling
      (4) music activities
   b. Make a list of activities which will contribute to the child's understanding of the environment and perceptual development.
   c. Make a list of stories that can be dramatized. Plan ways to dramatize these stories.

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XII-8

UNIT XII-8

THE EXCEPTIONAL CHILD

SUBJECT: Sure You Can Do It!

TASKS: Feeds exceptional children or assists these children with mealtime activities

Directs exceptional children in activities involving language abilities

Assists with exceptional children's activities involving social skills

Trains exceptional children in self-care skills

OBJECTIVES: Be able to
(1) suggest ways to help children learn skills for basic self-care
(2) identify five types of speech problems that affect language development
(3) evaluate progress of children in language development
(4) plan activities to improve language and social development of children

SELF-CARE

REFERENCES: Bensberg, Gerald J. (ed.) Teaching the Mentally Retarded. Atlanta, Georgia: Southern Regional Education Board. 1965. pp. 64-97.

Perry, Natalie. Teaching the Mentally Retarded Child. New York, New York: Columbia University Press. 1962. pp. 59-69.

The mentally retarded child needs a chance to become self-sufficient by learning to do things for himself. Many times it is easier to do what is needed for this child than to teach him how to do it for himself. The long, slow learning process involves much patience on the part of the person working with this child. If a child care aide does everything for the mentally retarded child, she will be neglecting one of the most important phases of the child's training.

Self-care skills are those an individual must learn before he can participate adequately in the world around him and gain self-respect. These skills include: (1) feeding, (2) dressing, (3) toileting, (4) washing and grooming, (5) health habits, such as brushing teeth and using handkerchief, and (6) basic self-directional skills, such as identifying self, controlling self, following instructions, completing tasks, and holding temper. Learning self-care skills usually takes longer and requires more teaching for the mentally retarded child than for a normal child. An important principle in teaching these skills is to use the same routine in the same setting each time. Repetition is an essential element in the learning process of this child.

The development of self-care skills cannot be over-emphasized. When the mentally retarded child learns these skills, he begins to realize success in his own accomplishments. He needs motivation, positive reinforcement, and practice to ensure his being able to use these skills effectively. The methods used in teaching self-care skills, therefore, are very important.

The following suggestions should prove helpful when assisting mentally retarded children in learning self-care skills:

1. Show approval for real efforts made by the child.
2. Do not expect the child to do things perfectly--after all, he is learning.
3. Use real situations, whenever possible, to motivate the child. For example, let him button his own coat rather than button two pieces of cloth together.
4. Be consistent.
5. Use the simplest way to teach self-care skills, teaching one step at a time.
6. Make the learning experience as pleasant as possible.
7. Know the child and how he learns best.
8. Do not hurry the child; give him ample time to learn a skill.
9. Try different methods in teaching a self-care skill, analyzing the child's problems in learning very carefully.

LANGUAGE DEVELOPMENT

REFERENCE: Bensberg, Gerald J. (ed.) Teaching the Mentally Retarded. Atlanta, Georgia: Southern Regional Education Board. 1965. pp. 39-50.

Mentally retarded children should have opportunities to develop means of communication with others. Words should be made meaningful to them.

Language development includes listening and understanding as well as talking. The ability to grasp relationships between words and concepts is a key to understanding. Children with limited speech usually need help in activities where verbal symbols and understanding are necessary for successful participation.

Language problems of the mentally retarded will differ because of the different interests and behavior patterns of these children. Language ability will differ according to chronological age and level of intelligence.

Mentally retarded children enlarge their vocabularies with words of concrete rather than of abstract meaning. They are able to learn only simple language.

Before a child can learn to understand language, he must be able to discriminate one sound from another. It is important that a mentally retarded child hear many repetitions of the same speech sounds. It is advisable to use the same stories, songs, and records over and over.

Language should be associated with activities. Playing is a stimuli to talking. To help the children understand more words, the activities should provide opportunities for associating languages with experiences. Facial gestures and expressions will give meaning to what is said.

Directions should be given in very simple language and then discussed. Pantomime and illustrations may be used. Give the child time enough to absorb what he has heard. Be sure that he is listening and that he understands the words. If he does not respond to directions, he may not know how to carry out instructions, or he may not want to respond.

If the children look at the person who is giving directions, they are more likely to respond. The child care aide should remind the children often to "Watch me." Sometimes it will take other types of motivation to get them to respond. Ask the children questions to determine if they understand the story or the directions.

The child care aide should provide an environment and experiences which will help the child to expand his vocabulary. Small groups will help to induce talking. Use as little criticism as possible and as much praise as possible.

If a child becomes confused and unable to talk when he is asked a question, the teacher can direct the attention toward some other child. Some children may become disturbed when asked to take part in a group discussion. Wait until they are ready before asking them. They may be more talkative when they are happily engaged in group play.

The children should be asked to talk about things they are most interested in. They should be free to talk about anything that they wish. Some children are likely to imitate what the others say; they should be called on first. The child care aide should repeat to the class what each child says.

New words should revolve around experiences, and the subject should be kept simple. Beginning with one word, the child care aide may construct a story by allowing the children to contribute. For instance, if a child says "cat", the teacher may ask him to say more about the cat. He might say "Meow." Another child might say, "The cat meows." This discussion might be made into a story.

Some children are very hard to understand, but with encouragement they will put forth more effort to speak clearly and be more willing to accept criticism. A recorder is very beneficial in teaching language skills. When children realize they will hear themselves talk, they often try harder to talk more distinctly.

The supervisor may give the child care aide a list of words for each child to learn. During the day, the child care aide should say the words often and repeat them slowly. In this way the words begin to communicate meaning.

Learning words by singing is easier than by memorizing them just to recite. It is more important that the child care aide stress vocabulary development rather than correct enunciation and grammar. Extensive use of understandable language, perfect or imperfect, is far more important for the happy adjustment of the mentally retarded child than an understanding of grammar.

Some criteria for evaluating progress in language development are:

1. Does the child understand more of what is said?

2. Can he make his wants known more easily?

3. Does he talk more?

4. Does he speak more clearly?

5. Has his vocabulary increased?

SOCIAL SKILLS

The need for social skills may be felt long before self-care and language skills are mastered by the mentally retarded child. These skills are difficult for this child to develop, however, since retardation in any one area has a serious effect on other areas of development. Mental retardation, therefore, reduces the child's chances to (1) explore the environment, (2) meet others, and (3) develop concepts that are common to most children.

Social skills include (1) considering the rights of others, (2) requesting and accepting help, (3) imitating others, (4) playing and working with others, (5) helping others, (6) competing with others, (7) being courteous to others, and (8) obeying rules that others make.

As the mentally retarded child is developing social skills, he is finding out what he is like, what other people are like, and what the world is like. Since he cannot learn everything at once, he will feel more confident if others will help him learn those things that are understandable to him. He needs to find that the world is manageable. He is only vaguely aware of relationships among people since he is mostly concerned with himself.

Do not expect the mentally retarded child to remember to say "thank you." Help him to learn such words, however, by using them at the appropriate time and letting him know when these words are expected of him. Praise him when he does use them properly.

There are many lessons to be learned about property rights and sharing as the child learns to live with others. He begins to find out that some things are his, and some things belong to others. It is difficult and often confusing to master the concepts of property rights.

The exceptional child must learn something about possessing before he is ready to learn about sharing. If another child snatches the toys from him and he snatches them back, it is not because he is selfish. He must learn to be a member of the group before he will be more willing to share.

The mentally retarded child also faces a big lesson in dealing with frustration and angry feelings. He often feels helpless and hopeless in trying to make things happen that he wants to happen. Frustration leads to anger, or it may lead to depression. He must learn to live with these difficult feelings. He is helped in his task of learning social skills if the adults around him are calm, patient, and reassuring. He must be praised and given confidence that he will be accepted. He must have some assurance that others will help him manage his feelings. Most important is the fact that adequate social skills are very difficut for the mentally retarded child to achieve.

Some guidelines to follow when teaching social skills to mentally retarded children are:

1. Teach children how to be friends, using situations as they arise.
2. Tell stories about friends.
3. Encourage each child to select a partner for certain activities.
4. Teach songs and finger plays about friends.
5. Praise children who try to help each other.
6. Teach children to recognize when they need help.
7. Encourage each child to help himself when possible.
8. Plan special activities which require imitating others.

9. Encourage children to take turns being the leader in certain activities.

10. Praise children for being good sports.

QUESTIONS:

1. How much help should be given a mentally retarded child when teaching self-care skills?

2. Why is the method used to teach self-care skills so important?

3. A good rule to follow when teaching self-care skills is to
   a. expect the child to perform the skill exactly as it was taught.
   b. teach several small steps at one time and have the child practice doing them.
   c. use real situations to motivate the child.

4. In teaching self-care skills, the child care aide should
   a. use the same routine in different settings.
   b. use the same routine in the same setting.
   c. use different routines in different settings.

5. A mentally retarded child needs
   a. more help than others in developing self-care skills.
   b. about the same amount of help as others in developing self-care skills.
   c. less help than others in developing self-care skills.

6. Language refers to
   a. any behavior that helps the child communicate with others.
   b. speech or vocal communication only.
   c. all sounds made by children.

7. Briefly describe the following types of speech problems that affect language development:
   a. Delayed speech--
   b. Articulation defects--
   c. Stuttering--
   d. Organic speech disorders--
   e. Voice disorders--

8. If a mentally retarded child stutters, the child care aide should
   a. guess what he is trying to say.
   b. say it for him.
   c. wait patiently until he finishes what he is trying to say.

9. True or False. Muscles involved in speech are also used in chewing, swallowing, and breathing.

10. True or False. Blowing a ping pong ball across a table can help to improve speech development.

ASSIGNMENTS:

I. Plan one or more activities which will help to improve the social skills of the children at the center where you are employed.

II. Observe a child at the center each day for a week to determine his progress in language development, using the evaluation criteria given in this unit. Write a brief report of your study.

ANSWER SHEETS

FOR

INSTRUCTIONAL MATERIALS STUDY QUESTIONS

Answer Sheet
for
UNIT I-1

WHAT IS A CHILD CARE AIDE?

SUBJECT: Babysitter or Teacher?

1. Any six of the following:

   Supervised play
   Development of manipulative skills
   Equipment suitable for child's size
   Creative experiences
   Pleasant associations with adults
   Group experiences
   Environment for happy emotional development
   Physical care

2. a. Social
   b. Social
   c. Social
   d. Physical
   e. Intellectual
   f. Emotional

3. Love
   Physical care
   Security
   Independence
   Achievement
   Experimentation
   Approval
   Respect

4. The Association for Childhood Education International
   a. Purposes:
      To work for the education and well-being of children
      To promote desirable conditions, programs, and practices in the schools--nursery through elementary
      To raise the standard of preparation and to encourage continued professional growth of teachers and leaders in this field
      To bring into active cooperation all groups concerned with children in the school, the home, and the community
      To inform the public of the needs of children and how the school program must be adjusted to fit those needs

b. Members: nursery, kindergarten and elementary teachers, parents, community workers, and others interested in child care and training

National Association for the Education of Young Children

a. Purposes:
To provide a medium for the advancement, development, and assessment of sound group programs focused on the education and well-being of young children under eight years of age
To extend, develop, and interpret sound standards and practices in services to young children

b. Members: all who are professionally engaged or are otherwise concerned with the well-being of young children

5. Three to 203

6. The financial depression
The war period

7. Head Start
Answer should include the following ideas: It is for children between three to five from low-income families; it provides language opportunities and a wide variety of experiences; it helps prepare children for school; parents are involved in all aspects of the program; activities begin with simple concepts and skills and build on these; emphasis is placed on improving language, healthful living, developing curiosity, building self-image, and respecting authority as a means to self-discipline.

8. b, d

9. a. Day care centers--non-profit facilities
   b. Child care center--state supported
   c. Private nursery schools and kindergartens--privately supported
   d. Head Start program--federally supported

ASSIGNMENT: After reading p. 91-94 in Leeper, Good Schools for Young Children, investigate your community to determine the types of child care services available. Write a brief report on at least five schools or centers including the following information: (1) name of school or center, (2) address, (3) name of director, (4) classification of school or center according to those given in the reference, (5) number of children, and (6) purpose of the school or center.

Answer Sheet
for
UNIT I-2

WHAT IS A CHILD CARE AIDE?

SUBJECT: Well, All Right!

NO STUDY QUESTIONS

ASSIGNMENT: Without being critical of your employer's facilities, select question from each of the three division listed on page A-9, A-10, and A-11. Briefly analyze your training station in relation to the characteristics you select.

Answer Sheet
for
UNIT I-3

WHAT IS A CHILD CARE AIDE?

SUBJECT: Sixteen Tons

1. b. Accept the additional responsibility and ask for instructions.

2. c. Report to work because it is the right thing to do.

ASSIGNMENT:

I. Using the list of responsibilities which may be assigned to a child care aide, select those which you are not performing in your training station. What information do you feel you need to be able to perform these tasks?

II. Thinking of the qualities you feel you possess that will help you in your work as a child care aide, write a page telling why you selected child care as a vocation.

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Answer Sheet
for
UNIT II-1

THE CHILD CARE AIDE: A MEMBER OF THE TEAM

SUBJECT: Hey, Coach!

1. a. Become familiar with assigned duties.
   b. Develop a sense of responsibility.
   c. Become familiar with the organization.
   d. Be a cooperative team worker.
   e. ...Add others

2. In order for children to develop satisfactorily and to feel secure, it is important that the staff members work together.

3. a. Be assigned special duties
   b. Be treated as a member of the team
   c. Be given jobs that require some effort on my part and that give satisfaction
   d. ...Add others

4. Your attitude is reflected in the people with whom you work. For example: If you are enthusiastic, others are inclined to be more enthusiastic.

5. The answer should emphasize that in many ways understanding others helps one to gain insight into what one's own responses are and why these responses were made.

6. True

7. False

8. True

9. False

10. True

11. d. Silently disagreed with the action of the teacher, but carried on with your work

12. d. Learn to face your conflicts and work with her.

13. b. "Spilling it to a friend" or
    d. Participating in art or music activities

14. a. Needs more time to know you
    d. May have had unpleasant experiences with adults

15. a. Do not complain and gossip.
    b. Do not discuss child's behavior.
    c. Do not criticize a child's parents.
    Student may explain this more fully in his own words.

Answer Sheet
for
UNIT II-2

THE CHILD CARE AIDE: A MEMBER OF THE TEAM

SUBJECT: Scoreboard

1. Planning sessions help the staff members to work together with purpose and harmony in performing their assigned tasks.

2. Meetings should be held at least once every two weeks. The child care aide may not be required to meet each time.

3. Any six of the following:
   a. Organization of the school
   b. The responsibilities of teachers and others
   c. Use of the physical set-up
   d. Care of materials and plans for new equipment and materials
   e. Suggestions for changes or improvements in the activities
   f. Individual children and their needs
   g. Teacher-child relationships
   h. Parent and community contacts
   i. Records
   j. Professional improvement of the staff

4. Yes, special problems of individual staff members, personal affairs of teachers, and problems of non-professional staff members

5. c.
   d.

ASSIGNMENT: Make a list of your weak points. Outline ways to improve yourself in these areas. Discuss your plan with your teacher.

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Answer Sheet
for
UNIT II-3

THE CHILD CARE AIDE: A MEMBER OF THE TEAM

SUBJECT: Who, Me?

1. The center should provide opportunities for children to:
    a. learn about themselves and others.
    b. develop social relationships.
    c. learn about the outer world.
    d. learn to deal with reality.
    e. have creative and aesthetic experiences.
    f. develop skills in both large and small muscle activities.
    g. take responsibilities for his bodily needs.

2. To learn how to be a part of a group

3. a, d

4. It provides a learning situation which, at the same time, gives children an opportunity to talk as they work.

5. Rest and activity

6. a. A child who usually plays cooperatively is at odds with one or more of the group.
    b. A child who is usually skillful drops something.
    c. A child is cut or hurt when he is no longer accurate in judging distances.
    d. A child who usually shares becomes possessive.

ASSIGNMENTS:

I. How does the master schedule in the center where you are working provide for the opportunities listed in answer to question 1?

II. Using Heffernan and Todd's The Years Before School, page 607, Table 17-1 as a guide, set up your own chart and outline the daily schedule of activities at the center in which you are employed. Show the time schedule, the activities of the children, and your assigned tasks according to the sample on the following page.

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Answer Sheet
for
UNIT III-1

THE CHILD AND HIS FAMILY

SUBJECT: Here I am!

1. a. Beginning (man and wife only)
   Childbearing (oldest child under 2 1/2 years)
   Preschool children (oldest child between 2 1/2 and 6 years)
   School children (oldest child between 6 and 13 years)
   Teenagers (oldest child between 13 and 20 years)
   Children leaving home (oldest child over 20 years)
   Middle years with no children at home
   Aging
   b. Answers vary according to student's situation.

2. b. Unpredictable

3. To love and be loved
   To feel secure or to belong
   To feel adequate
   To achieve
   To gain independence
   To believe in something

ASSIGNMENT:

I. Write a paper comparing the home atmosphere of each family in the case study. Some questions you might answer are: Can a child grow up with a happy, well adjusted personality in the atmosphere described in each home? How has the atmosphere already influenced the older child in each family? Which of the basic needs are being met and which are being ignored? Predict the type of behavior each family member will have during the rest of the day.

II. Select at least two of the factors listed on pages A-34 and A-35 which influence the child's development. Discuss ways in which you think these factors might affect the child in the family.

Answer Sheet
for
UNIT III-2

THE CHILD AND HIS FAMILY

SUBJECT: Where Am I Going?

1. a. Physical - motor
   b. Social
   c. Moral
   d. Intellectual
   e. Emotional

2. Any six of the following are correct:
   a. Learning to walk
   b. Learning to take solid foods
   c. Learning to talk
   d. Learning to control the elimination of body wastes
   e. Learning sex differences and sexual modesty
   f. Forming simple concepts of social and physical reality
   g. Learning to relate oneself emotionally to parents, siblings, and other people
   h. Learning to distinguish right and wrong

3. True

4. False

5. True

6. c. Can reach their potential

7. a. A continuous and orderly process

8. b. Gross body activity to specific movements

9. 1. Infancy

10. 5. Puberty and adolescence

11. 3. Preschool

12. 2. Early childhood

13. 4. School age

14. 2

15. 1

16. 4

17. 3, 5

18. 4

19. 1

20. 2

21. 4

22. 3

23. 3

24. 4

25. 3

26. 1

27. Answer should contain the idea that a child's motor development influences his relationships with other children, affects his concept of himself, and enables him to entertain himself.

28. Four to six years

29. Concepts are hierarchical.

30. Concepts are individualized.

31. Concepts develop from undefined to specific.

32. Concepts are emotionally weighed.

33. Answer should point out that the child is greatly influenced by his family and ordinarily accepts their conduct as his standard for behavior.

ASSIGNMENT:

I. Record the following information for three children at the child care center where you are working. Try to account for any variations that you may observe.

	Child 1	Child 2	Child 3
Age			
Sex			
Height			
Weight			
General Physical Appearance			

II. If any of the supplementary references listed at the beginning of this subject area are available, discuss with your teacher which of the activities suggested at the end of the chapters would be best for you to do.

Answer Sheet
for
UNIT IV-1

THE CHILD IN A CHILD CARE CENTER

SUBJECT: What's She Doing Here?

NO STUDY QUESTIONS

ASSIGNMENT: Use the following questionnaire to evaluate the parent-center relations at your training station. What can you do to help with the activities planned for the parents? Discuss your conclusions with your teacher.

Answer Sheet
for
UNIT IV-2

THE CHILD IN THE CHILD CARE CENTER

SUBJECT: Who's Afraid of the Big Bad Wolf?

1. Number concepts

2. Group discussions, language games, telling and reading stories, talking with adults

3. c. Bring some blocks and ask Mark if he will help you build a bridge.

4. b. Suggest that the mother stay a while.

5. a. Talk with each child and call him by name.
   b. Read a story to the child.
   c. Give the child reassurance by explaining that adults are there to help him.
   d. Keep the routine simple.

6. The feeling that no one likes him

7. That he can trust other adults and children

ASSIGNMENT: Select at least six of the needs illustrated on the charts on page A-59 through A-61. Think about the activities you have observed and participated in and describe the experiences the children have had that would lead to the development of the concepts listed under the needs. For example, have any comments been made about the color of food during lunch time?

Answer Sheet
for
UNIT IV-3

THE CHILD IN THE CHILD CARE CENTER

SUBJECT: I Can Do It!

1. Security refers to the feelings that come as a result of having many experiences of being accepted and of feeling safe. It deals with a perons's relationships with people. Adequacy refers to the feelings a person has about himself, his idea of the kind of person he is.

2. a, b, c, d

3. It may cause them to lack confidence in themselves and/or develop feelings of guilt.

4. b. Gets attention when the adult wants to give it

5. c. He behaved as he felt adults expected him to behave.

6. b. Kay was restrictive and Bana permissive.

7. A person with a permissive attitude will allow the child to experiment and explore for himself unless the action will result in undesirable consequences. A person with a restrictive attitude will stop the child unless he is sure that what the child is doing is desirable--this gives the child much less freedom for exploring and trying out things for himself.

8. b. Listen attentively when he talks to her.

9. a. Pushing children as quickly as possible from one stage of growth to the next
   b. No, because children need time to satisfy their needs in each stage before moving on to the next one

10. To be able to look at the way a child behaves without feeling a necessity to change his behavior

11. The way they walk, hold their hands, stand, talk (both amount and quality of speech), behavior

12. Accept his feeling without condemning or blaming him.

13. To express themselves through words, crying, motor activity (punching a bag), and creative media

14. Answers will vary but should include the following ideas:

    Accept the child as he is.
    Help the child find acceptable outlets for his feelings.
    Try to meet the child's needs as he indicates what they are.
    Acquire skills in handling the child which will increase his confidence.

ASSIGNMENTS:

I. Describe a situation in which the guidance given to a child helped him to feel more secure and confident.

II. Review the sections in Bradley and Gahagan at the end of the discussion of each need entitled, "The Adult Provides." As you carefully read these sections, ask yourself whether or not you have done any of these things which could help to meet the basic needs of children. Select several of these suggestions and think about how you could carry them out at your training station. Keep a record of what you do and of the child's reaction. Show this to your teacher and discuss your experiences with her.

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Answer Sheet
for
UNIT IV-4

THE CHILD IN THE CHILD CARE CENTER

SUBJECT: Oh, Boy, Here We Go Again! He Did It!

1. Develop respect for rights of others.
   Give child sense of security.
   Protect child from bodily harm.
   Promote his health and well-being.

2. a. Give suggestions in a positive rather than a negative way.
   b. "Keep the sand in the sandbox," would be a possible alternative.

3. a. Use a quiet, confident tone of voice.
   b. Speak firmly to the children, but not raise my voice.

4. a. Give the child a choice only when you intend to leave the situation up to him.
   b. In this situation, one could say, "It's time to put your coat on."

5. Answer should be in the student's own words, but contain the idea that one will be more successful in changing a child's behavior when his attention is turned to an act which has equal interest for him.

6. b. Reinforce her statement by adding another suggestion.

7. Answers will vary according to student's situation.

8. Setting limits helps give a child a feeling of security and helps a child to act freely because he knows the adult will set limits to protect him. When few limits are set, the child may become defiant or dependent, unable to be himself, afraid of action.

9. b. Leave her alone.
   Because a new baby in the family may create hostility which needs to be released.

10. Excessive demands on the child to keep clean and to be good
    Failure to receive attention and response
    Harsh methods of control.

11. "I know how you feel. You are cross because ... When you feel like that, give the punching bag a whack."
    The first statement does not help the child identify his feelings. It does not show that the adult understands the child's feelings.

12. A physical setup which is designed for the child (appropriate furniture, play materials within reach) and a flexible program that imposes only necessary limitations

13. b. It is not a good idea to compare children.
    d. Children should not be told they are bad or that people will not like them. Disapproval should be shown of the action, but not the chold.
    e. Children should not be humiliated or shamed because of their behavior.

14. 2. Democratic control

15. 3. Child control

16. 1. Adult control

17. 2. Democratic control

ASSIGNMENTS:

I. The following suggestions for setting limits help to support the child for his growth. (Refer to Read, pp. 229-235.) During the next week watch for situations which are related to these suggestions. Describe what happened, the responses of the child, and your reaction.

   a. Set only necessary limits.
   b. Be sure the child understands the limits.
   c. Be consistent without being inflexible or afraid.
   d. Give the child time to accept the limits.
   e. Accept the child's feelings when he "tests out" limits.

   Turn this assignment in to your teacher.

II. a. Record specific examples of the use of any of the various methods of guidance listed below.

   1. Approval, either verbal or non-verbal
   2. Explaining
   3. Tolerating (ignoring)
   4. Using physical means--leading by hand, force
   5. Deprival of privilege
   6. Examples of expected behavior
   7. Expectation of cooperative spirit

   b. How did you feel about each of these incidents? Did you agree with the action taken? Why or why not?

III. Here are some statements about children which are not complete. Each statement describes a particular kind of behavior problem. For example, the first statement says, "I think the child who never finishes eating on time should..." You are to finish the statement by describing what you think would be the best way to treating his particular problem.

Answer Sheet
for
UNIT IV-5

THE CHILD IN THE CHILD CARE CENTER

SUBJECT: Hi Ho . . . Ho Hum

1. This is normal for a child this age.

2. No, he should have been guided to the locker and encouraged to remove his coat and hang it up himself. He has reached the stage where it is necessary that he be doing things for himself.

3. a. Encourage him to wipe it up.

4. Label the shelves, drawers, and boxes.

5. He may develop excessive negativism, be inhibited, or lack self-confidence.

6. Children may have accidents or refuse to use the toilet.
   This behavior should be handled in a casual, accepting manner.

7. Casually accept her interest and make some comment, such as "Boys and girls are different. Boys stand up and girls sit down."

ASSIGNMENTS:

I. Observe two or three children as they put on and take off garments.
   a. Did they take off their sweaters or coats by themselves and put them away or did they need help?
   b. To what extent was their ability to help themselves related to the style of their coat, shoes, etc.?
   c. Were the children influenced by the activities of the other children at the center?
   d. If you were responsible for this activity, how much help did you give the children? Give reasons for your actions.

II. Observe two or three children as they go to the bathroom.
   a. Did they go directly to the toilet when they entered the room?
   b. Did they need help from an adult? If so, what kind of help was given?
   c. Did they flush the toilet?
   d. Were they affected by the presence of other children or adults? In what ways?
   e. What comments did they make?
   f. Did they wash their hands beter using the toilet?

Answer Sheet
for
UNIT IV-6

THE CHILD IN THE CHILD CARE CENTER

SUBJECT: Time for a Break

1. Listless, whiny and cross, crying for no apparent reason, and change in behavior

2. Do not let them engage in vigorous exercise for long periods of time.
   Do not allow too much running, chasing, yelling, and screaming.
   Follow periods of active play with quiet play.

3. Check ventilation.
   Adjust radiators and thermostat--keep room temperature around 70 degrees.
   Pull the shades.
   Put toys out of sight.
   Be sure there is nothing to distract the children's attention.

Answer Sheet
for
UNIT V-1

CHILDREN'S FOOD AND EATING HABITS

SUBJECT: Are You Ready to Eat?

1. a. Active play--running
   b. Did not eat well--lack of appetite

2. a. Quiet play--sandbox
   b. Good appetite--ate all their food

3. Quiet play helps to calm a child down before he eats.

4. Stories, music, puzzles, or any other quiet activities

5. a. Sets example for children
   b. Prevents spreading of disease

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Answer Sheet
for
UNIT V-2

CHILDREN'S FOOD AND EATING HABITS

SUBJECT: Where's My Place?

1. a. Knife should be next to plate with the cutting edge toward the plate. Fork should be on left side of the plate.
   b. Glass should be on right side at the tip of the knife for right-handed children.
   c. Knife should be on right side, napkin on left.

2. a. An attractive-looking table
   c. Brightly colored dishes
   e. A neatly set table
   f. Food that looks good

ASSIGNMENT: Plan a table decoration (centerpiece or place cards) the children with whom you work could make.

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Answer Sheet
for
UNIT V-3

CHILDREN'S FOOD AND EATING HABITS

SUBJECT: You Are What You Eat

1. a. Milk and Milk Products
   b. Meat, Fish, Poultry and Eggs
   c. Fruits and Vegetables
   d. Bread and Cereals

2. The menu should include milk and milk products, meats, and butter.

3. The size servings Susie ate were sufficient for a child her age.

4. Menu A
   a. Meat, Fish, Poultry and Eggs
   b. Fruits and Vegetables
   c. Bread and Cereals
   d. Fruits and Vegetables
   e. Milk and Milk Products

   Menu B
   a. Meat, Fish, Poultry and Eggs
   b. Bread and Cereals
   c. None
   d. None
   e. None

5. Menu A (Although the foods in Menu B would not harm the child, they do not contribute much to his nutritional needs. Children's capacities are limited; therefore, it is important that they eat foods high in nutritional value.)

6. a. Vitamin A, iron, Vitamin B
   b. Calcium, vitamin A, vitamin B_2
   c. Vitamin A
   d. Vitamin C
   e. Vitamin A

   a. 1, 2, 3
   b. 1, 3, 5
   c. 1
   d. 4
   e. 1

ASSIGNMENT: Plan a bulletin board or display which shows foods high in nutritive value and their effect on the body.

Answer Sheet
for
UNIT V-4

CHILDREN'S FOOD AND EATING HABITS

SUBJECT: Talk, Talk...When Do We Eat?

1. Helping the child develop a positive, accepting attitude toward eating

2. No, because one of the ways they learn is by touching and feeling. This may help the child learn to like the food.

3. When the child can handle eating utensils skillfully, learn to eat a variety of foods, and feel a part of a group

4. To set a good example and to be patient with his attempts at eating

5. It may interfere with his enjoyment of eating and cause him to develop a negative attitude toward mealtime.

6. Because their motor skills are limited

7. Tell Mrs. Smith that she should not be concerned with Jane's eating habits--they are normal for a child that age. If she continues to treat Jane in this manner, she may find that Jane's eating habits will get worse instead of better.

8. She should recognize the fact that such accidents are normal if they only occur occasionally. No issue should be made of it. If the child does this for the attention she gets, give her more attention during the day until she feels secure. If she plays at the table and often causes a spill, encourage her in a firm manner to finish eating the meal.

9. At birth

10. Becuase the child's earliest feelings come from what happened to him when he was hungry

11. Yes, because a child's appetite is closely related to his emotional adjustment.

12. No, because forcing her to eat when she was upset may turn her against food.

13. Because large servings tend to discourage a child

14. No, because different children need different amounts of food due to different body builds, growing rates, and/or types of activity.

15. Not necessarily

16. a. When conversation is interfering with eating, suggest that the child eat now and talk later.
    b. When shy children contribute to the conversation, they should be given encouragement.

17. Any three of the following:
    a. Give the child small servings.
    b. Give the child some freedom to choose his food.
    c. Give the child some freedom to eat in his own way.
    d. Do not force the child to eat.
    e. Be relaxed.
    f. Serve attractive food.

ASSIGNMENTS:

I. Observe the children with whom you work at mealtime and give examples of their eating behavior.

    a. What things do they do well?
    b. What skills are they still learning?
    c. What kinds of help do they need?
    d. What table manners do you think they are ready to learn?

II. Recall some incident where a child's appetite was influenced by his feelings. Explain.

Answer Sheet
for
UNIT V-5

CHILDREN'S FOOD AND EATING HABITS

SUBJECT: Hey, What's For Lunch

1. Probably ignore it because this may be his first step in learning to like it
2. The child may begin to rebel and not eat any of the new foods.
3. He should be encouraged, but not required, to taste the food; making an issue of trying the food may turn him against it.
4. Secure and confident
5. The child is likely to follow the example set by the adult.
6. "Joe, do you know what 'crisp' means? Try this and see."
7. It might be mentioned to Patricia's mother that the center is concerned about her habit of not eating vegetables add that you are encouraging her to eat them. A suggested procedure might be:
    a. Put a small amount on her plate at a time.
    b. Fix them simply. (Children do not care for casserole type mixtures.)
    c. Do not introduce two new vegetables at one time.
    d. Do not make an issue of eating them.
    e. Make favorable, subtle remarks to others in the group about liking the vegetable.
8. a. Teacher is setting a poor example.
    Negative attitudes toward a particular food.
    b. Adults should not expect too much of children in terms of manners.
    Resistance to eating.
    c. Adult is paying too much attention to child's eating habits.
    Rebellious attitude toward eating
    d. Too large portions have been served.
    Slow eating or resistance to eating at all

ASSIGNMENT: Recall the children in the child care center and answer the following questions:

What factors in the child care center environment encourage good eating habits?
How do the adults contribute to making lunch time a pleasant social experience for the children? Give examples.
How do the children participate in the procedure of serving?
Of what value is the child's participation in the lunch procedures?

Answer Sheet
for
UNIT V-6

CHILDREN'S FOOD AND EATING HABITS

SUBJECT: Bet You Can't Eat Just One!

1. Their capacity is limited and their energy needs are great. Snacks keep them from being over-tired and too hungry at mealtime.

2. a. Orange juice
   b. Carrot sticks
   c. Sandwiches
   e. Milk
   g. Apple wedges

   Whether or not the foods are included in the Basic Four Food Groups

ASSIGNMENT: Make a list of sanitary procedures to follow when preparing food for children. If you have this responsibility, use the checklist each time you work in the kitchen.

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Answer Sheet
for
UNIT VI

CHILDREN'S PLAY: A LEARNING EXPERIENCE

SUBJECT: Play With a Purpose

1. Student's answer should point out that play:
   a. releases surplus energy.
   b. provides opportunities for children to practice future roles.
   c. provides a way for children to explore and orient themselves.
   d. helps children solve problems.
   e. aids children in developing social relationships and skills.
   f. serves as a means of helping the teacher to evaluate the attitudes and understandings of the child.
   g. ...others added by the student.

2. B. 4 years

3. A. 2 years

4. B 3 years

5. D. 5 years

6. B. 3 years

7. C 4 years

8. a. 3. Make a game out of swinging.
   b. 3. Watch him carefully as he tries different ways of sliding.
   c. 1. Be able to walk unaided across the board.

9. Compliment him on his skipping and encourage him to skip to the restroom to wash his hands.

10. Any three of the following: Provide opportunities for
    a. development of large muscles
    b. emotional release
    c. creative expression
    d. development of concepts of size
    e. shape and number values
    f. development of readiness for reading

11. No, an important aspect of dramatic play is that the children be allowed to play without interference and unnecessary directions.

12. This means that the emphasis in art activities should be that the child enjoy the experience without concern about the appearance of the end product. Each child should be allowed to express himself as he wishes without being told, "Do it this way."

13. Assure the child that you know how she can do it and encourage her to do it herself. If necessary, make a suggestion to help her get started.

ASSIGNMENTS:

I. If possible, observe the children while they are involved in dramatic play. Describe the incident and then arrive at the answers to these questions. Did their play seem to fit into any of the reasons given in Read, pp. 282-289 for dramatic play? What feelings did they seem to be expressing? What roles did the children take? Did they seem to receive a feeling of satisfaction from their play.

II. If you have an opportunity to help the children at your training station with painting or clay activities, describe the difference in the way they paint or use clay. What conclusions would you draw about directing these kinds of activities? (Review pp. 310-318 in Read and 454-458 in Todd.)

III. Plan an art or craft activity for the children at your training station. What guidance do you intend to give the children? What do you expect the children to gain from this experience? Turn these assignments in to your teacher.

Answer Sheet
for
UNIT VII-1

BOOKS AND MUSIC FOR CHILDREN

SUBJECT: Tell Me A Story

1. a.

Tell the story	Read the story
More direct, informal, and intimate	Provides example of teacher reading from book
Can adapt length or vocabulary to a particular group of children	Helps children associate pleasure with reading
Can establish and maintain eye contact	

   b. Be sure they are seated so they can all see and hear.
   Show the illustrations as the story is read or told.
   Read for only a short period of time.

2. a. Three
   b. Five
   c. Four
   d. Four

3. No, children this age are not able to distinguish between fact and fancy. The gruesome details may trouble the young child. This kind of story will be more appropriate when the child is a little older.

ASSIGNMENTS:

I. A. Select at least three of the books in the child care center where you are employed and evaluate them in terms of the criteria listed on page A-122 of this unit.
   B. Would the books help children in meeting any of the needs discussed in Todd, pp. 410-416?
   C. If so, briefly explain why you think it would help meet the need(s) you selected.

II. Select a story to read to the children and practice telling it uniil you can do so effectively and can feel comfortable about doing it. If possible, plan for some aids, such as a flannel board, to use when telling the story.

Answer Sheet
for
UNIT VII-2

BOOKS AND MUSIC FOR CHILDREN

SUBJECT: Sing Me A Song

1. b, d, e

2. c. I like Billy's rhythm.

3. c, d, e, a, b

ASSIGNMENTS:

I. What musical activities have you observed at your training station? Suggest two or three things you could do as you work with the children to help them enjoy and learn more about music and rhythm.

II. Refer to Leeper, p. 361-368, and select the developmental sequences at which you think the children at your training station are in terms of:
   a. singing
   b. listening
   c. rhythmic experiences
   d. creating

III. Practice (and show the class or your teacher) at least five finger plays.

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Answer Sheet
for
UNIT VIII

TOYS AND GAMES FOR CHILDREN

SUBJECT: Fun and Games

1. Probably not, because the memory span of preschool children is short and they will forget what to do next. With young children it is better to start in and explain what to do as you play the game with them.
2. A. Intellectual development
3. C. Emotional development
4. C. Emotional development
5. B. Dramatic and imitative play
6. A. Intellectual development
7. B. Dramatic and imitative play
8. D. Physical development and coordination
9. D. Physical development and coordination
10. D. Physical development and coordination
11. C. Emotional development
12. X
13. X
14. X
15. 0
16. 0
17. 0
18. 0

19. X

20. 0

21. 0

ASSIGNMENTS:

I. Select at least five of the toys or pieces of play equipment used at your training station.
   a. Evaluate them in terms of the criterial given on page A-135 af this unit.
   b. In what ways would these toys aid in the child's development?

II. Observe the children as they play outdoors and participate in activities that aid in their large muscle development.
   a. What equipment is available which will promote the physical development of the children?
   b. What differences do you see between
      (1) boys and girls?
      (2) children of different ages in terms of ability to run, climb, throw a ball, push, pull, etc.?
   c. After observing the children over a period of time, do you notice any improvement in their physical skills?

III. Select at least three games to teach the children at your training station.

Answer Sheet
for
UNIT IX

NATURE AND SCIENCE EXPERIENCES

SUBJECT: Look, Teacher!

1. Allow children time to look at things.
   Help children learn to ask simple but significant questions.
   Be interested in things the children see or find.
   Help children see relationships and interpret their findings.

ASSIGNMENTS:

I. Study the sections in Todd which describe science activities for the present season of the year. Select several of these suggestions and add some of your own to use with either individual children or the group of children. Write out what you plan to do and discuss these ideas with your teacher.

II. Select (or add your own) at least five or six ideas from Todd, pp. 322-343, "Understanding the Body" and "Introduction to Different Sciences" that you could use either informally or in a group situation at your training station. Be alert to situations in which science concwpts can be taught. Keep a record over a two week period of time of the situations in which you were able to help the children learn something about science.

Answer Sheet
for
UNIT X-1

HEALTH AND SAFETY FOR CHILDREN

SUBJECT: Oops, Uh-Oh!

1. The child care aide should notify the teacher immediately and remain with the other children while Sally is receiving care (and parents are notified).
2. Take the opportunity to explain to Mary and the children why she fell and why her behavior was unsafe.
3. A calm, confident attitude
4. Jon is using a stick to dig in the sand. You should find a sand shovel and encourage Jon to use it. The stick would be removed from the play area.

ASSIGNMENTS:

I. Recall an accident that happened in the child care center. Which of the four major causes of accidents was involved in this incident?

II. Choose any two of the following safety practices and write how you would explain to the children the reason for the practice.

Picking up sticks and tree limbs on playground.
Using tools, such as hammers, safely.
Not running with a stick in the hand.
Not throwing clods on the playground.
Using blunt pointed scissors.

III. Find or write a story to read to the children which would teach safety. (Examples: How the Fire Chief Helps Us or Smokey the Bear.)

IV. Plan a game to play with the children that would teach safety. (Examples: Who are You? Where do You Live?)

Answer Sheet
for
UNIT X-2

HEALTH AND SAFETY FOR CHILDREN

SUBJECT: Gesundheit!

1. Tommy had a fever. (NOTE: The return of such a child to the center may result in his being ill again and in causing the illness of others in the group. The health policies must be explained to the parents so they will understand them and help to enforce them.)

2. Report the rash to the teacher or the nurse.

3. Approach Don quietly and explain to him that he forgot to wash his hands after toileting and before eating. Go with him to the bath; see that he washes his hands. Explain to him that he might become ill if he does not wash his hands before eating and he must wash his hands after toileting.

4. The director should explain to the parents that the Public Health policies are designed to protect the health and safety of everyone in the community, just as those in the center are designed to protect health and safety of the children and the staff.

5. b. Check by designated person to detect illness signs

6. c. At least 3 days

7. a. Germs are transferred from hands to mouth.

8. c. Discharge from nose and eyes

9. b. In closed, tight, container

10. a. They are involved in situations concerning health and safety and are allowed to practice what they have learned.

11. b. "I am tired all the time."
    d. "Teaching is a job."
    f. "I get excited when 'accidents' happen at school."

12. a. Cots give more protection from drafts and a cold floor.
    b. Cots are more expensive and require more space.

ASSIGNMENTS:

I. Write a story, plan a skit, or find a story to read to the children which will help them to develop a good attitude toward medical personnel.

II. Carefully read the material adapted from Leeper's section on Better Health for Florida's Children on pages 304-309.

   a. Select two experiences or activities from five of the eight areas (a total of 10) and write a brief description of something similar that you have observed in your center. Discuss the possible outcome for the child of the experience you observed.

   b. Select two or three of these activities which you have not observed in your center and plan how you might include these as you work with the children.

Answer Sheet
for
UNIT XI-1

INFANT CARE

SUBJECT: What Am I Like?

1. Sight

2. They will startle him.

3. b. They all do the same things in the same sequence, but at various ages.

4. a. Four months
   b. Six months
   c. Ten months
   d. One year

5. Cry, scream, stiffen his body, or hold his breath

6. Situations in which he is held motionless or restricted

7. Repeat the behavior, because children learn attitudes before they learn the words to describe them.

8. The kinds of persons he is with

9. Any three of the following:

   Give extra love and tenderness.
   Remain calm.
   Talk soothingly to the infant.
   Encourage his explorations but eliminate situations that might have disastrous consequences.
   Select toys within his range of ability.
   Be patient and understanding.

10. Impose reasonable limitations and restraints.

11. Delight, distress, excitment
    Fear, disgust, and anger in addition to the above
    Elation and affection in addition to the above

12. b. Smile back at someone
    e. Like to be held upright

13. Hands and eyes

ASSIGNMENT: Refer to the list of behaviors listed on pp. 156-157 in Brisbane, The Developing Child. Observe the infants with whom you work and list the motor activities they can accomplish.

Answer Sheet
for
UNIT XI-2

INFANT CARE

SUBJECT: Where's That Bottle?

1. Because it makes the baby feel safe and content, and experiences during feeding affect his feelings about his world
2. To bring up air which has been swallowed and which will cause stomach pains.
3. A young baby is not capable of expelling air until he is four to five months old.
4. Make few exceptions in his schedule.
5. Tilt his head back slightly and/or give him a swallow of milk.
6. Spit out the food or hold it in his mouth
7. This is a natural reaction and does not mean he does not like the food.
8. Thin--similar to milk
9. Because Vitamin C is destroyed by heat
10. He will sleep well, gain steadily, and be alert and happy when he is awake.
11. During the last half of his first year
12. It should be kept full to avoid excessive air swallowing.
13. Patience
14. Eight to ten months
15. The baby might sense this feeling and not eat well.

Answer Sheet
for
UNIT XI-3

INFANT CARE

SUBJECT: What's Wrong?

1. Crying
2. She might have indigestion, colic, or want her diaper changed.
3. Cries that are angry howls which end abruptly at the sight of a person
4. His cries are low moans accompanied by yawning and sighing.
5. He is wet and cold.
6. He is full.
7. He is hungry.
8. Ignore the cry unless it persists for a long time.
9. They are likely to sense her feelings and may become irritable and fussy.
10. No, babies differ a great deal in their inborn temperment.

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Answer Sheet
for
UNIT XI-4

INFANT CARE

SUBJECT: Oh, No, Not Again!

1. The diaper
2. Waterproof panties should be worn by the baby only when it is important to keep his clothes dry.
3. Soiled diapers should be rinsed in the toilet, put into a plastic bag, and placed in the diaper bag (equipment bag) provided by the parent of the baby.
4. In front
   In the back if she sleeps on her back; in front if she sleeps on her stomach
5. 8-10
6. Place two fingers of one hand inside the diaper next to his skin.

Answer Sheet
for
UNIT XI-5

INFANT CARE

SUBJECT: What's That Thing Up There?

(Any two of the toys listed in items 1-4 are correct.)

1. Seven to nine months; rattles, metal cups, lids and covers, beads, unbreakable animals, blocks, balls, bean bags
2. One to three months: crib jingles, mobiles, rattle
3. Ten to twelve months: balls, toys on wheels, plastic animals, cans
4. Four to six minths: rattles, teething rings, cups, spools, plastic toys
5. Play builds his body
   strengthens muscles
   refines manipulation
   stimulates mental activity
   helps him learn about his world
6. Talk; learning to get along with them; to master his body

ASSIGNMENTS:

I. Using the list on p. 41 in Infant Care, evaluate at least three of the toys available to infants at your training station.

II. Have you put into practice any of the ways listed in Brisbane, The Developing Child, p. 163 that a baby can be allowed to "help"? If so, explain. If not, select one to try.

III. Make a mobile to use on a baby's crib at your training station.

IV. Select one infant at your training station and describe his "play" over a three-day period.

(4)

Answer Sheet
for
UNIT XI-6

INFANT CARE

SUBJECT: Z-zzzz

1. c. Eighty percent of the time

2. b. Half of the time

3. As the baby's stomach increases in size, he is capable of eating a larger amount of food. Thus, the baby can sleep for a longer period at one time.

4. a. On the stomach
   b. (1) He can stretch his full length.
      (2) He can use his lung to fullest capacity.
      (3) He can move his head from side to side preventing a flat spot at the back of his head.
      (4) He can lift up his head and chest with his arms, which aids in strengthening his muscles.
      (5) He is less likely to kick off the covers.

5. Too much pressure on the soft bones may cause them to be misshaped.

6. So the baby will not snuggle down and cut off his air supply

7. With a waterproof sheet, covered with a cotton mattress pad

8. Physical health, mental efficiency, emotional control

9. 70-72° F.

10. That it is something pleasant

11. Wash, change diaper, and change clothes

Answer Sheet
for
UNIT XI-7

INFANT CARE

SUBJECT: Splash, Splash!

1. 72°-75° F.

2. 98°
   With your elbow--it should feel lukewarm

3. a. The outer ear may be wiped with a cloth, but that is all that is necessary. Dried mucus just inside the nostrils may be removed with a pinch of cotton rolled into a firm length and dipped in sterile water.
   b. A cotton swab stick

4. Cradle cap is a mild disorder of the scalp which results in the formation of scales or a greasy crust. It can be softened by cleaning the scalp with oil or a thin solution of baking soda and water.

5. b. Water only

6. Creases and folds of skin

7. It tends to dry the skin and may cause irritation in body creases.

8. He may spit up.

9. He might inhale the fine particles which are harmful to the lungs.

10. Do not ever leave him unattended.

Answer Sheet
for
UNIT XI-8

INFANT CARE

SUBJECT: Don't Be Half-Safe!

1. d. All of these

2. a. No pillow is used.

3. d. All of these

4. Test it on the inside of the wrist.

5. They cling to the nostrils and can cause smothering.

ASSIGNMENT: If you work with infants at your training station, make a check list of safety precautions to observe while performing the tasks you have been assigned.

Answer Sheet
for
UNIT XI-9

INFANT CARE

SUBJECT: Call the Doctor!

1. Report to your supervisor.

2. Report the findings to the supervisor.

3. Mortality during the first few years of life is still high. Infants have developed little immunity and serious complications could easily develop.

4. During the first months of the infant's life

5. Babies are born with a kind of resistance to diseases to which their mothers developed antibodies that passed through the placenta. The immunity lasts for only about three months.

6. Polio (infantile paralysis)
   Diptheria
   Smallpox
   Whooping cough (pertussis)
   Tetanus (lock jaw)
   Measles

7. The body temperature of a baby should be taken by rectum.

8. Cleanse the thermometer immediately after use. Moisten a piece of paper tissue with cool water and soap it well. Hold the instrument by the top, with the bulb end down, over a waste container. Beginning at the top, wipe down with a firm, rotary motion, using friction and getting well into the grooves of the tube and over the bulb. Discard the wipe. Moisten a fresh wipe with clean, cool water and rinse the thermometer. Soap and rinse the thermometer again. Dry it with a fresh wipe, using the same motion. Put the thermometer into the case, bulb end first.

9. a. Fever
   b. Drowsiness
   c. Vomiting
   d. Loose, fluid bowel movements, marked with odor changes and unusual color
   e. Rash

10. Mouth: 98.6 degrees F.
    Rectal: 99.6 degrees F.
    Axillary: 97.6 degrees F.

Answer Sheet
for
UNIT XII-1

THE EXCEPTIONAL CHILD

SUBJECT: Where Are You Going?

1. a. To help each child become as self-sufficient as possible.

2. d. State institutions

3. a. To improve the overall functioning of the child as much as possible

4. b. Treatment and surgery

5. A

6. B
Opportunities for learning these skills may also be found in any agency offering educational and training services.

7. A

8. A

9. B
Halfway houses provide as little guidance as is needed.

10. B

11. A

12. D

13. C

14. D

15. B

16. A, D

17. C

ASSIGNMENT:

Describe the type of facility in which you are employed as a child care aide. Be sure to answer the following questions:

a. Does the facility specialize in the care and training of children with only one major type of handicap, such as mental retardation? If so, specify the type or types of exceptional children being trained and cared for in this facility.
b. What services are provided for the exceptional child? for his family?
c. What are the primary objectives of the facility in relation to the needs of the exceptional child?

Answer Sheet
for
UNIT XII-2

THE EXCEPTIONAL CHILD

SUBJECT: What Is the Matter?

1. a. The exceptional child is one whose intellectual, physical, emotional, or social condition differ from the "average" child to such an extent that changes are required in providing for his educational needs.
   b. Handicapped means unable to compete successfully in all areas of life or unable to adjust to normal living conditions.
   c. Ambulatory child is one who is able to walk or move about without help.
   d. Non-ambulatory child is one who is unable to walk or move about by himself.

2. a. More praise and rewards than "average" children.

3. c. Physically handicapped

4. b. Excel in hearing ability

5. c. Limited hearing

6. a. Normal or above average mental ability

7. b. Multiply handicapped

ASSIGNMENT:

I. a. Write to one or more of the agencies listed on pages A-211 through A-212. Tell them the type of center in which you are working, and ask for materials related to any of the exceptional children with whom you work.
   b. If there are local chapters of any of these organizations, talk with your teacher and training sponsor about the possibility of your visiting the office or attending one of their meetings. Write a brief report of your visit.

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Lubbock, Texas

Answer Sheet
for
UNIT XII-3

THE EXCEPTIONAL CHILD

SUBJECT: Who Is He, Anyway?

1. a, c, e, f, g, h
2. c. More than 200
3. Mongolism, PKU
4. German measles, Drugs
5. Oxygen
6. Encephalitis, meningitis, mumps, deprived
7. b. 2%
8. E
9. B
10. D
11. C
12. c. Motor control
13. a. All mentally retarded are slow to learn and limited in learning billity.
14. c. Infancy to 12 years
15. b. Mild, moderate, severe, profound
16. a. Mild--can learn some academic skills, hold simple jobs, and learn to live independently
    b. Moderate--cannot learn academic subjects or become independent; can learn to perform simple tasks in sheltered or supervised settings
    c. Severe--dependent, unable to learn more than self-care; requires continued care and supervision
    d. Profound--totally dependent; requires continued institutional living

17. These terms indicate the degree of retardation and give a clue as to how much the individual is likely to learn.

18. The educable can learn to live independently with training, and the trainable cannot; trainables are slower to learn and more limited in ability.

19. b. Creativeness

20. c. Greater speech difficulty than "normal" children

21. a. Shorter than normal children

ASSIGNMENT:

View the filmstrip More Than Love, if possible. (18 minutes color with script and narration on record. Available on free loan basis from local National Foundation Chapter--March of Dimes or the National Foundation, 800 Second Avenue, New York, New York 10017.)
a. During the viewing, make a list of questions you wish to discuss with your teacher or supervisor at the training station.
b. Write a two page report on a specific birth defect: possible causes, effect, treatment, and possible means of prevention.

Answer Sheet
for
UNIT XII-4

THE EXCEPTIONAL CHILD

SUBJECT: May I Help You?

1. Similar

2. a. Active friendliness
   b. Kind firmness
   c. Concern
   d. Patience
   e. Sense of humor
   f. Acceptance

3. b. Attitudes of employees toward the retarded.

4. b. Try to work with the children as individuals as much as possible.

5. a. Frustrated and have many fears.

6. c. Listen to the parents sympathetically without becoming emotional.

7. b. Answer their questions honestly if she knows and refer them to the supervisor when she does not know.

8. B

9. A

10. A

11. B

12. A

13. A

14. A

ASSIGNMENT:

If your answered yes to less than ten questions on the checklist, Am I Ready for a Career with Exceptional Children, take another look at yourself to be sure that you are seriously interested in this area of child care services. Make a plan for improving yourself if you still believe that you want to work with exceptional children. Discuss this plan with your teacher-coordinator.

Answer Sheet
for
UNIT XII-5

THE EXCEPTIONAL CHILD

SUBJECT: What Are You Going To Do?

1. c. Have professional training or experience

2. c. Ask the supervisor before trying a new activity with the children.

3. a. A means of teaching the mentally retarded child to behave in a certain way

4. b. Suzie's folder

5. a. Samples of the child's art work

ASSIGNMENTS:

I. Make a list of suggestions that will help you to work more effectively with the professional staff in the training station in which you are employed.

II. Observe one of the children at the training station during the lunch period, juice time, music activities, or in the bathroom. Use the sample report forms on pages 250-254 in Perry, Teaching the Mentally Retarded Child, as a guide in evaluating the child's performance, or ask the supervisor at your training station for suggestions for reporting such information.

Answer Sheet
for
UNIT XII-6

THE EXCEPTIONAL CHILD

SUBJECT: That's a No-No!--BEHAVIOR PATTERNS AND BASIC NEEDS

1. a. Self-care--taking care of personal needs includes development of motor skills and skills in eating, bathing, dressing, and toileting
   b. Socialization--interacting with others, following directions, playing or working in groups, learning to share, making field trips, and participating in the group
   c. Expression--language development, emotional stability, release of feelings

2. a. the way one copes with the demands of society
   b. the degree to which a person's level of performance measures below or above that typical of his age group
   c. the person's actual age
   d. the age level at which a person performs expected tasks

3. c. Is lower than for a normal child

4. b. Below that of his chronological age

5. b. 50

6. Similar to

7. Go through similar developmental stages but at a slower rate than other children

8. Are

9. Do

10. Do not

ASSIGNMENTS:

I. Review Bensberg, Teaching the Mentally Retarded, pages 5-17 and Recreation for the Mentally Retarded, pages 20-27, on typical skills of children at different ages
   a. Outline some of the skills and abilities that are expected at each age level from 6 months to 12 years.

b. Since mentally retarded children are known to have a maximum mental age of a 12-year-old, how will this outline help you in working with mentally retarded children?

II. Briefly outline Bensberg's guidelines for the child care aide working with young or severely retarded children in an institutional setting as given on pages 36-37, Bensberg, Teaching the Mentally Retarded. How will knowing these guidelines help you to meet individual needs of these children?

Answer Sheet
for
UNIT XII-6

THE EXCEPTIONAL CHILD

SUBJECT: That's a No-No!--DISCIPLINE AND BEHAVIOR SHAPING TECHNIQUES

1. a. Rewards used in behavior shaping

2. a. Food: candy, juice, cookies
   b. Social rewards: pat, praise, smile
   c. Play: toy, opportunity to play

3. a. At the beginning of the undesirable act

4. b. Reward him as quickly as possible

5. c. Ignore his behavior to keep from reinforcing undesired learning

6. c. Remove her from the play area as quietly as possible

7. Reinforce, or reward, only desirable behavior patterns or habits which you want the child to repeat later.

8. a. Teach one step at a time, rewarding him for each step that he learns.

9. b. Joey will interpret her frown as disapproving and be hesitant to repeat the act.

Answer Sheet
for
UNIT XII-7

THE EXCEPTIONAL CHILD

SUBJECT: Let's Try It This Way

1. B

2. E

3. C

4. D

ASSIGNMENTS:

I. Review the eight important considerations for planning activities to meet the special needs of mentally retarded children as given on pages 34-38 in Recreation and Physical Activity for the Mentally Retarded. Briefly explain these suggestions in your own words.

II. Using guidelines given in the references,
  a. plan at least one of each of the following types of activities which you can use with the mentally retarded children at your training station:
    (1) motor skill activities
    (2) art and craft activities
    (3) story telling
    (4) music activities
  b. Make a list of activities which will contribute to the child's understanding of the environment.
  c. Make a list of stories that can be dramatized. Plan ways to dramatize these stories.

Answer Sheet
for
UNIT XII-8

THE EXCEPTIONAL CHILD

SUBJECT: Sure You Can Do It!

1. Help the child until he learns the routine.

2. He needs more motivation, more positive reinforcement, and more practice than the normal child to be able to use these skills effectively.

3. c. Use real situations to motivate the child.

4. b. Use the same routine in the same setting.

5. a. More help than others in developing self-care skills

6. a. Any behavior that helps the child communicate with others

7. a. Delayed speech--learns to talk much later than normal age due to mental retardation and lack of stimulation
   b. Articulation defects--speech sounds improperly made because of defect in learning or in formation of parts of the body required for speech
   c. Stuttering--disorder affecting rhythm of speech
   d. Organic speech disorders--speech problems caused by brain damage or cleft palate
   e. Voice disorders--unusual quality in speech sounds, may be due to physical defect or learned habit.

8. c. Wait patiently until he finishes what he is trying to say.

9. True

10. True

ASSIGNMENTS:

I. Plan one or more activities which will help to improve the social skills of the children at the center where you are employed.

II. Observe a child at the center each day for a week to determine his progress in language development, using the evaluation criteria given in this unit. Write a brief report of your study.

UNIT TESTS

UNIT I TEST

WHAT IS A CHILD CARE AIDE?

Select the letter of the phrase which correctly completes the statement. Choose only one answer for each item.

1. One of the main reasons parents send their children to child care centers is because the provide
   A. opportunities for children to learn to read and write.
   B. group experiences which help children to adjust socially.
   C. situations in which children learn to follow a routine schedule.

2. Which of the following is not a purpose of the Association for Childhood Education International?
   A. To work for the education and well-being of children
   B. To raise standards of preparation for teachers
   C. To lobby for improved salaries for nursery school teachers

3. Which of these types of child care centers is supported entirely by fees from families who have children enrolled in the center?
   A. Day care centers
   B. Private nursery schools
   C. Head Start programs

4. One of the objectives of modern nursery schools is to
   A. help each child develop in his own way.
   B. prepare children for the first grade.
   C. provide projects which all children complete.

5. To meet licensing requirements, child care centers must meet minimum standards in regard to
   A. number of square feet of space allowed per child.
   B. amount of time spent in various activities.
   C. amount of money spent on toys and play equipment.

6. Which of these qualities would be most important for a child care aide to develop?
   A. Ability to make children obey
   B. Ability to lead games and tell stories
   C. Genuine interest in children

7. Employment opportunities for trained personnel in child care services are
   A. limited.
   B. increasing.
   C. decreasing.

For questions 8-10, write on your answer sheet the letter of the area of development which each of the experiences in a child care center would help to meet.

EXPERIENCES

8. Teacher helps child express his anger in an acceptable way
9. Children read books and listen to stories
10. Children are served a nourishing lunch at noon

AREAS OF DEVELOPMENT

A. Physical
B. Intellectual
C. Social
D. Emotional

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Lubbock, Texas

II-1,2,3

UNIT II TEST

THE CHILD CARE AIDE: A MEMBER OF THE TEAM

Select the letter of the phrase which correctly completes the statement. Choose only one answer for each item.

1. Self-evaluation is
   A. unnecessary if conferences are held with one's employer.
   B. recommended primarily for beginning employees.
   C. an important step in improving work habits and attitudes.

2. One of the most important purposes of staff meetings at child care centers is to
   A. give the director an opportunity to assign tasks.
   B. give staff members an opportunity to share experiences and concerns.
   C. give the staff an opportunity to discuss special problems of individual staff members.

3. The degree of teamwork amont staff members at the child care center will
   A. have no influence on the behavior of the children.
   B. have little influence on the behavior of the children.
   C. be reflected in the behavior of the children.

The daily schedule of activities at a child care center provides opportunities for the child to grow in many ways. Write on your answer sheet the letter of the purpose of each of the activities listed in questions 4-7.

ACTIVITIES	PURPOSES
4. Climbs on jungle gym	A. Learn about the outer world
5. Takes excursions in the community	B. Have creative and aesthetic experiences
6. Participates in dramatic play	C. Develop skills in large and small muscles
7. Learns to wash hands, flush toilet, wipe nose	D. Learn to deal with reality
	E. Take responsibility for bodily needs

Which of the types of behavior described in questions 8-15 would contribute to success as a child care aide? On your answer sheet write:
A if you would recommend the behavior
B if you would not recommend the behavior

8. Jane is assigned to routine tasks in the center where she is employed and feels that she should be given more responsibility. She believes

that her former experiences with children have prepared her for the same tasks as the assistant director.

9. Alice does not agree with some of the rules at the center where she works. When she is in charge, she puts into practice what she believes is the best way to handle children.

10. Sarah shows respect for the teacher and her co-workers because she believes children are influenced by the way they see adults behave.

11. Joan has been trying to analyze her own behavior in different situations because she thinks this will help her to understand the behavior of the children.

12. Mary finished her task of getting out the craft supplies and sat down to rest before the children came in from their play. Susie was still preparing the snack, but since this was not part of her job, Mary did not think she should help her.

13. Bana was concerned about the behavior of one of the children so she decided to discuss this with the teacher at the child care center.

14. When Sue becomes annoyed with some of her co-workers or becomes angry about something, she keeps it to herself and hides her feelings rather than finding some acceptable way of expressing them.

15. Sally is sure the parents of one of the children in the center neglect their child and discusses this with her co-workers to see if they agree.

UNIT III TEST

THE CHILD AND HIS FAMILY

Select the letter of the phrase which correctly completes the statement. Choose only one answer for each item.

1. A child's attitudes toward people, things, and life in general are influenced most by
   A. his teacher.
   B. his family.
   C. his nursery school.

2. As the family passes through the various stages of the family life cycle,
   A. few changes occur in their patterns of living.
   B. many changes must be made in their patterns of living.
   C. the parents must make some changes in their patterns of living, but the children are seldom affected.

3. When a child grows up in a home where he feels loved and secure, he is likely to be
   A. egotistical.
   B. very emotional.
   C. well-adjusted socially.

4. Which of the following statements is not true?
   A. There is little relationship between the basic needs and the development of a healthy personality.
   B. When a child's basic needs are not met, he may develop nervous mannerisms, suck his thumb, or develop eating problems.
   C. If a child's basic needs are met, he is likely to be well-adjusted.

5. Which of these statments about position in the family is true?
   A. The oldest child in the family has the least problems of adjustment.
   B. The youngest child in the family has the least problems of adjustment.
   C. All positions within the family involve certain problems of adjustment.

6. Growth can be described as occurring
   A. at a regular pace.
   B. in evenly spaced spurts.
   C. continuously, but not in a uniform manner.

7. Kathy works with children who are three years old. Which of the following should she expect them to be able to do?
   A. Know several songs, but often sing out of tune
   B. Play next to, but seldom with, other children
   C. Speak in two or three word sentences

8. A child increases in ability to get along with other people. The quality of this kind of change in an individual is referred to as
   A. progress.
   B. growth.
   C. development.

9. Which of the following would be an example of the principle "Development proceeds from general to specific responses"?
   A. A child uses his hands before learning to control his feet.
   B. A child waves his arms freely before being able to grasp an object.
   C. A child develops more rapidly physically than emotionally.

10. The fact that learning to walk seems to happen overnight, but is really a gradual process, is an example of the principle
    A. development is continuous.
    B. development is similar for all.
    C. there is a correlation in development.

11. The principal persons with whom the child interacts socially during his preschool years are
    A. people in the neighborhood.
    B. members of his family.
    C. father and mother.

12. The children at Sally's training station are five years old. Which of the following would most likely be an example of their behavior?
    A. Tommy takes his jacket off and puts it on with little or no help.
    B. Janice throws a temper tantrum when she is angry.
    C. Sue talks almost constantly.

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UNIT IV TEST

THE CHILD IN THE CHILD CARE CENTER

Select the letter of the phrase which correctly completes the statement. Choose only one answer for each item.

1. One way of helping children adjust to the child care center is to
   A. allow little time for free-choice activities because the children will not know what to do.
   B. introduce the children to the daily routines which will remain constant.
   C. be sure the children participate in group activities so they get to know one another.

2. One of the most important objectives of child care centers is to provide an environment in which the children learn to
   A. obey adults without question and follow directions.
   B. control their emotions in an adult manner.
   C. trust adults and children.

3. During the time they are in child care centers, children should
   A. learn many concepts and attitudes through their experiences.
   B. spend most of their time playing and not really learn very much.
   C. become skilled in muscular development.

4. Which of the following types of behavior would help the child to meet his need for achievement?
   A. Encouraging the child to do as well as another child in the group
   B. Giving the child praise only when he has done something well
   C. Providing experiences in which the child is likely to succeed

5. Which of these behaviors would not help a child develop a sense of belonging?
   A. Giving the child a simple duty to perform
   B. Listening attentively when the child speaks
   C. Allowing a child to play without requiring that he share with others

6. Showing approval or acceptance of a child as he is helps meet his need to
   A. be loved.
   B. excel.
   C. revere.

7. Children often find it difficult to be separated from their mothers during their first few days at child care centers. It is usually recommended that
   A. the mother stay for a while.
   B. the mother leave the center.
   C. the mother keep the child at home.

8. Some children are shy and reluctant about joining other children in play activities during their first days at the center. The child care aide should
   A. tell the child to join the other children.
   B. take the child over to a gooup of children.
   C. allow the child to continue the activity he has selected.

9. A teacher with a permissive attitude would
   A. stop a child's activity unless she was sure that what the child was doing was desirable.
   B. allow the child to continue the activity unless it would result in undesirable consequences.
   C. permit the child to make his own decisions regardless of the consequences.

10. The most important thing that can be done to help a child feel secure and adequate is to
    A. praise his efforts in every activity.
    B. give him seecial attention and affection.
    C. accept his feelings without condeming or blaming him.

11. The staff at the child care center should
    A. plan activities for the parents.
    B. not expect the parents to be involved in center activities.
    C. tell parents how to rear their children.

12. The aim of discipline is to
    A. punish the child when he has done something wrong.
    B. prevent misbehavior by guiding the child toward acceptable behavior.
    C. teach the child to obey the adult who is in charge.

13. Which of the following statements is true about setting limits for children?
    A. Setting limits helps to give a child a feeling of security.
    B. Setting limits may cause the child to be afraid to do things, to become dependent.
    C. Setting limits prevents a child from expressing his feelings.

14. Which of the following comments would be most helpful to a child who has just hit another child?
    A. It's wrong to hit other people. When you feel like hitting someone, hit the punching bag.
    B. I know how you feel. You are cross because you want to play with the game Billy has. When you feel like that, hit the punching bag.
    C. We don't hit children. You go sit on the other side of the room until you are ready to behave.

15. A basic routine or regular schedule at the child care center
    A. is recommended because children feel more secure when they know what is to happen next.
    B. is not recommended because small children find it difficult to follow a routine.
    C. is difficult to follow because so many unexpected things occur when working with children.

16. When an accident occurs and something is spilled the
    A. child who was responsible should be scolded.
    B. teacher should quietly clean up the spill.
    C. child should be encouraged to clean up the spill.

17. Children should be encouraged to
    A. keep the play area clean and neat.
    B. return toys to their proper places.
    C. stay as clean as possible while playing.

18. Children who are tired are likely to
    A. cry for no apparent reason.
    B. be silly and boisterous.
    C. behave as they usually do.

19. Which of the following should be done to prepare the room for rest period?
    A. Open all the windows to provide fresh air.
    B. Check to see that the temperature is around 60° F.
    C. Move or cover things that might distract the children.

Write on your answer sheet the letter of the type of discipline which is described in questions 20-23.

DESCRIPTION OF BEHAVIOR OF CHILD

20. Learns to think for himself
21. Is free to carry out own desires
22. Becomes a person who is submissive
23. Learns to disregard other's rights

TYPES OF DISCIPLINE

A. Adult control
B. Democratic control
C. Child control

Questions 24-31 list statements that might be made when working with children.

Write A for each statement you would use.
Write B for each statement you would not use.

24. Use both hands when you climb.

25. Don't play with that stick.

26. Would you like to go inside?

27. Would you like peas or carrots for lunch?

28. Is that too hard for you? Let me do it for you.

29. If you don't stop throwing sand, I'll have to spank you.

30. Turn the pages of the book carefully.

31. It's time to eat lunch.

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UNIT V TEST

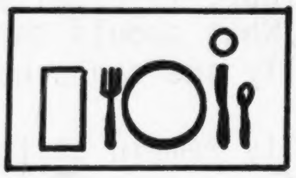
CHILDREN'S FOOD AND EATING HABITS

Select the letter of the phrase which correctly completes the statement. Choose only one answer for each item.

1. Which of the following activities would be most appropriate before mealtime at the child care center?
   A. Reading or telling stories
   B. Playing active games outdoors
   C. Skipping and dancing to music

2. Which of these statements about before mealtime activities is true?
   A. Fresh air and exercise just before mealtime help to improve a child's appetite.
   B. Active play before mealtime helps to relax a child and increase his appetite.
   C. Quiet play before mealtime helps to calm a child and improve his appetite.

3. Which of these statements is true about the table setting shown below? The menu is:
   Meat Loaf
   Buttered Peas Toast Sticks
   Fruit Cup
   Milk



   A. The glass should be placed above the fork.
   B. The knife is unnecessary and should be removed.
   C. The napkin should be on the right.

4. The approximate size of a serving of meat or vegetable for a child of nursery school age is about
   A. 2 to 4 T.
   B. 4 to 6 T.
   C. 6 to 8 T.

5. Because children are growing so rapidly, they need
   A. more food than adults.
   B. the same amounts of food as adults.
   C. more food for their size than adults.

6. Which of these menus would contribute most to a child's nutritional needs?
   A. Hot dog on a bun, baked beans, coke
   B. Fish sticks, green beans, apple salad, milk
   C. Hamburger, Potato chips, candy bar, milk

7. What is the most important goal for the mealtime situation?
    A. That the child at least try all the foods served
    B. That the child eat all the food served on his plate
    C. That it be a pleasant, happy experience

8. The teaching of table manners should begin when the child
    A. can handle his eating utensils skillfully.
    B. is old enough to sit at the table.
    C. enters school (first grade).

9. When three-year-olds at the child care center touch and feel their food, they should
    A. be scolded and reminded to use their silverware.
    B. be allowed to explore the food in this way.
    C. be told to stop playing with their food.

10. When children spill their milk or have accidents at mealtime, the teacher should
    A. not make an issue of it.
    B. send the child from the table.
    C. point out to the other children what happened.

11. Which of the following statements about children's eating habits is true?
    A. Children are usually consistent in the kinds of food they eat.
    B. Children of the same age usually eat approximately the same amounts of food.
    C. Children are not consistent in the amounts of food they eat.

12. Sally, age four, is usually a good eater, but she often refuses to try new foods. What should the adult who sits at her table do?
    A. Tell Sally she can't have any dessert unless she eats all of her dinner.
    B. Have Sally remain at the table until she has eaten everything on her plate.
    C. Not make an issue of Sally's refusal, but casually call her attention to the food.

13. One purpose of serving snacks to children is to
    A. give them the energy they need to avoid a late morning slump.
    B. keep them from overeating at lunch.
    C. increase the amount of food they eat in a day.

In questions 14-18, some situations in which children refuse to eat are described. For each situation, write the letter of the reason which explains why the child may be refusing to eat.

SITUATION	REASON
14. Jill has no appetite at supper--her dog ran away this afternoon	A. Children are imitators
15. Kathy refuses to eat even though her mother cooks food especially for her and coaxes her to eat	B. Too high standards are expected
16. Susan refuses to eat the same foods her father does not eat	C. Eating habits are affected by emotional reactions
17. Jane, four, is constantly reminded of her table manners and expected to eat without spilling anything	D. Adults are over-concerned about a child's eating habits
18. John is often told to hurry while he is eating	

Which of the practices, listed in questions 19-22, are recommended when introducing new foods to children? Write
A for the practices you would recommend.
B for the practices you would not recommend.

19. Serve new foods in small amounts.
20. Serve new foods with foods that are familiar to the children.
21. Serve more than one new food at a time.
22. Serve the new food several times within the same week.

Which of the types of foods, listed in questions 23-27, do children usually prefer? Write
A if you would serve that type of food
B if you would not serve that type of food

23. Finger foods
24. Cold foods
25. Spicy foods
26. Colorful foods
27. Foods cut in small pieces

Which of the foods listed in questions 28-32 would you recommend be served to children at snack time? Write

A for the foods you would serve.
B for the foods you would not serve.

28. Fruit juices
29. Celery sticks
30. Potato chips
31. Soft drinks
32. Seedless grapes

UNIT VI TEST

CHILDREN'S PLAY: A LEARNING EXPERIENCE

Select the letter of the phrase which correctly completes the statement. Choose only one answer for each item.

1. Which of these stages of play would children pass through first?
   A. Playing with each other for a period of time
   B. Playing next to, but not with, each other
   C. Playing with others, but often changing groups

2. At which age would one expect children to play together and stay with a project until it is completed?
   A. Three
   B. Four
   C. Five

3. The value of play is often destroyed when an adult
   A. joins in playing with the children.
   B. offers numerous suggestions about how things should be done.
   C. lets the boys play in the doll corner.

4. When directing art activities, the child care aide should
   A. allow children to express themselves as they wish.
   B. make suggestions when children use the wrong colors for various objects.
   C. place the emphasis on the finished product.

5. Which of the following provides the best opportunity for the child to develop in many different ways as he uses the toy?
   A. Cars and trucks
   B. Color books
   C. Blocks

6. When directing outdoor play activities of four-year-olds, one would expect them to
   A. be able to walk unaided across a walking board.
   B. need help when going down the slide.
   C. be able to pump in the swing.

7. Which of the following is not a reason for children engaging in dramatic play?
    A. It helps them handle the problem of being "little" in a world of big people.
    B. It gives them a chance to act out experiences which may have been frightening.
    C. It prevents feelings of aggressiveness and anxiety.

Play serves many purposes in a child's life. Questions 8-14 describe some play activities. On your answer sheet, write the letter which indicates the main value of that play activity.

PLAY ACTIVITY

8. Group activities
9. Outdoor play
10. Playing "house"
11. Punching bag
12. Finger painting
13. Playing "doctor"
14. Jungle gym

VALUE OF PLAY

A. Provides for release of surplus energy
B. Aids in developing social skills
C. Gives opportunity to practice future roles
D. Provides way to explore their world
E. Helps to relieve anxieties about new experiences

UNIT VII TEST

BOOKS AND MUSIC FOR CHILDREN

Select the letter of the phrase which correctly completes the statement. Choose only one answer for each item.

1. With which of the following statements about the use of books would you disagree?
   A. Books should be used only as a "fill-in" when children tire of other activities.
   B. The time for using books should be planned as a specific part of the day's activities.
   C. Children's attitudes toward books are influenced by the way they see adults using them.

2. One advantage of reading a story rather than telling it is that it is
   A. easier to adapt the length or vocabulary of the story.
   B. one way to stimulate the child's interest in books.
   C. more direct and informal.

3. Five-year-old children would be likely to enjoy stories about
   A. animals that act like human beings.
   B. mysteries and adventures.
   C. people outside their immediate environment.

4. Music activities
   A. are worthwhile, but expensive.
   B. help children release tensions.
   C. can be embarrassing for shy children.

5. When teaching a new song to children, it is recommended that
   A. the entire song be taught at one time.
   B. the song be repeated until the children make few mistakes.
   C. the song be introduced with a story.

6. Which of these stages in learning to sing would a child pass through first?
   A. Recognize songs sung by others
   B. Sing on key with others
   C. Join in with an occasional phrase as another sings

In questions 7-12, which would you look for when choosing a book to read to three- to five-year-old children?

Write A if your answer is "yes."
Write B if your answer is "no."

7. Books that deal with everyday experiences
8. Books with four or five main characters
9. Books with little or no conversation
10. Books with words that rhyme or catch phrases
11. Books of fantasy about witches, goblins
12. Books that excite the child

UNIT VIII TEST

TOYS AND GAMES FOR CHILDREN

Select the letter of the phrase which correctly completes the statement. Choose only one answer for each item.

1. A toy for a young child should be
   A. such that the child is involved in its use.
   B. suitable for one main use.
   C. detailed in construction.

2. When guiding games for preschool children, it is a good idea to
   A. insist that the children follow the rules of the game.
   B. give the children detailed directions.
   C. change to a different game after a short period of time.

3. Games for preschool children should
   A. allow children to carry out their own ideas at times.
   B. require waiting for turns so children learn to be patient.
   C. involve choosing sides and team play.

4. Which of the following is least important to consider when evaluating toys for children?
   A. Can it be used in a number of ways?
   B. Can the child use it by himself?
   C. Is it a pleasing color?

Play equipment helps children develop in a variety of ways. Fill in on your answer sheet the letter of the type of development to which each of the toys listed in questions 5-10 would contribute most.

TOYS	TYPE OF DEVELOPMENT
5. Puzzles	A. Physical
6. Paints and clay	B. Intellectual
7. Climbing bars	C. Emotional
8. Building sets	
9. Bean bags and balls	
10. Puppets	

UNIT IX TEST

NATURE AND SCIENCE EXPERIENCES

Select the letter of the phrase which correctly completes the statement. Choose only one answer for each item.

1. Jim, age 4, brought an earthworm to nursery school. What should be the reaction of his teacher, who doesn't like worms?
   A. Ask him to take it out of her sight.
   B. Look at it with Jim, but ask him to take it home.
   C. Talk with him about earthworms and their function in the soil.

2. Science activities for preschool children
   A. should be planned and included in the curriculum.
   B. are not necessary to teach at this age.
   C. usually occur without any planning.

Which of the following attitudes on the part of the teacher would promote children's interest in their environment? Write
A if the attitude would.
B if the attitude would not.

3. Sally allows Billy time to look at some leaves even though the children are starting inside for story time.
4. Betty quickly answers Jill's question about a bird at the feeder and then changes the subject.
5. Mary noticed the children watching the two dogs playing outside and asked them questions about their size, color, and activity.

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UNIT X TEST

HEALTH AND SAFETY

Select the letter of the phrase which correctly completes the statement. Choose only one answer for each item.

1. Three children are playing in a sandbox and three other children are walking up a steeply inclined board and climbing onto the jungle gym. The child care aide in charge should stand
   A. halfway between the two groups.
   B. near the children at the sandbox.
   C. near the children climbing the board.

2. When a child is injured in an accident, the child care aide should
   A. administer first aid.
   B. notify the teacher.
   C. call a doctor.

3. Ginny fell out of the swing and started crying. Several of the other children gathered around her. The person in charge should
   A. calmly explain to the children what happened while checking to see if Ginny was injured.
   B. excitedly ask the children to go back to their play so she can check Ginny.
   C. check that Ginny is all right and scold her for being careless.

4. Which of the following statements about preschool children and accidents is true?
   A. If preschool children are given the reason behind safety rules, they will remember the rules.
   B. Preschool children must be watched constantly in order to prevent accidents.
   C. Preschool children need to have safety rules repeated over and over.

5. Health policies for child care centers usually recommend that children should be kept at home when they
   A. are tired and cross.
   B. are in the first three days of a cold.
   C. have an upset stomach within the last two days.

6. Typical health policies for child care centers usually include
   A. a daily examination of the children as they enter the center.
   B. administering of first aid for all accidents which occur.
   C. treatment of minor illnesses of the children.

7. Which of the following would be the most important reason for teaching children to wash their hands often during the day?
   A. To prevent toys and play equipment from getting dirty or sticky
   B. To prevent the children's clothes from getting dirty
   C. To prevent the transfer of germs from hands to mouth

In questions 8-11, which of the following are signs that may indicate a child is not feeling well?

Write A if it is a sign of illness.
Write B if it is not a sign of illness.

8. The child seems unusually tired.

9. The child eats more than usual.

10. The child cries more easily than usual.

11. The child is more quiet than usual.

12. The child's face is flushed, pale, or hot.

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UNIT XI TEST

INFANT CARE

Select the letter of the phrase which correctly completes the statement. Choose only one answer for each item.

1. Which of an infant's senses are least developed at birth?
   A. Sight
   B. Hearing
   C. Touch

2. Which of these emotions would most infants exhibit last in their sequence of emotional development?
   A. Laugh aloud when an adult makes a funny face
   B. React shyly to a stranger
   C. Express affection to an adult

3. An infant is likely to become angry or distressed when
   A. he is put down for a nap.
   B. his movements are restricted.
   C. he is given too much freedom.

4. What is the least effective way to express disapproval of a one-year-old's behavior?
   A. Tone of voice
   B. Facial expression
   C. Choice of words

5. All infants go through the stages of development
   A. at the same ages, but in different sequences.
   B. at different ages, but in the same sequence.
   C. at the same ages and in the same sequence.

6. An infant's two main tools for learning are his
   A. eyes and ears.
   B. hands and eyes.
   c. ears and hands.

7. When dealing with an infant who is aggressive in nature, it is important to
   A. set reasonable limitations on his behavior.
   B. give him extra love and tenderness.
   C. provide experiences in which he will be successful.

8. Infants should be helped to bubble or burp after being fed until they are
    A. three months old.
    B. six months old.
    C. nine months old.

9. Infants can be helped to adjust to a feeding schedule if
    A. they are fed whenever they wake up.
    B. few exceptions are made in the times they are fed.
    C. feeding is always continued until the infant drinks the required amount of milk.

10. If an infant has trouble learning to swallow solid foods, it may help to
    A. pat him gently on the back.
    B. give him larger spoonfuls of food.
    C. tilt his head back slightly.

11. Which of the following takes time for an infant to learn to do?
    A. Swallow liquids
    B. Chew solid foods
    C. Bite solid foods

12. When bottle-feeding an infant, how full should the nipple be kept?
    A. Half full
    B. Two-thirds full
    C. Completely full

13. When an infant starts feeding himself it is important that the adult
    A. show him how to use silverware.
    B. be patient and let him use his fingers.
    C. hold his hand and help him.

14. If an infant cries after being put down for his nap, one should
    A. pick him up and rock him to sleep.
    B. go back in the room and check that he is all right.
    C. ignore the crying unless it persists.

15. To what extent is the behavior of an infant affected by the attitudes and feelings of the adult caring for him?
    A. Not at all
    B. Very little
    C. Considerably

16. The extra thickness of a diaper for a boy should be placed
    A. in front.
    B. in the back.
    C. either in the front or back; it does not matter.

17. Soiled diapers should be
    A. put back in the diaper bag provided by the mother.
    B. rinsed out and put back in the diaper bag provided by the mother.
    C. hung up to dry and then put in the diaper bag.

18. Play
    A. is important for an infant's development.
    B. has little value until a child is about two years old.
    C. helps to keep an infant in a good mood, but has little value otherwise.

19. Toys for infants should not
    A. be expensive.
    B. have small parts.
    C. need to be cleaned.

20. The sleeping position usually recommended for infants is on their
    A. stomach.
    B. back.
    C. side.

21. While a one to three-month old infant is sleeping, he should
    A. not be disturbed.
    B. be turned from one position to another.
    C. be kept on his back as much as possible.

22. The temperature of the room where an infant sleeps should be
    A. 65°-68° F.
    B. 70°-72° F.
    C. 75°-80° F.

23. The temperature of the water for a baby's bath should be
    A. cool.
    B. lukewarm.
    C. warm.

24. An infant's ears and nose should
    A. should be cleaned often with a cotton swab stick.
    B. should be cleaned with a cloth when necessary.
    C. do not need to be cleaned.

25. It is not recommended that an infant be bathed
    A. just before eating.
    B. just after waking from a nap.
    C. just after eating.

26. When washing and drying an infant, special attention should be given to
    A. the creases and folds of skin.
    B. arms and legs.
    C. the shoulders and back.

27. If an infant develops cradle cap, his scalp should be treated with
    A. oil.
    B. soap and water.
    C. water only.

28. The method usually used to take an infant's temperature is
    A. mouth.
    B. rectal.
    C. axillary.

29. Which of the following is not necessarily a symptom of illness in an infant?
    A. Drowsiness
    B. Spitting up
    C. Loose bowel movements

30. During the first four to six months of life, an infant is
    A. highly susceptible to diseases.
    B. somewhat susceptible to diseases.
    C. relatively immune to diseases.

31. A minor ailment in an infant
    A. should be closely watched.
    B. seldom turns into anything serious.
    C. should always be reported to a doctor immediately.

Which of the practices in items 31-35 would you consider safe when caring for infants. Write

A for those you consider safe.
B for those you consider unsafe.

32. Go across the room to get a towel while bathing an infant.
33. Use a plastic bag under the sheet to protect the mattress.
34. Place an extra blanket on a chair next to the bed rather than on the end of the bed.
35. Place open safety pins in a bar of soap.
36. Test the temperature of foods by feeling the container.

In questions 37-41, match the probable cause with the kind of cry.

KIND OF CRY

37. A low-pitched moan
38. Angry howls which end when someone appears
39. Short sharp cry accompanied by a dilated abdomen and legs pulled up
40. An angry howl accompanied by sucking movements
41. Low-pitched moans broken by sighs

CAUSE

A. Hungry
B. Wants attention
C. Ill
D. Tired
E. Colic

In what order would you expect an infant to be interested in the following play activities listed in questions 42-45?

PLAY ACTIVITY

42. Grasp and manipulate objects
43. Watch things
44. Creep after objects
45. Pound, bang or throw things

ORDER

A. First
B. Second
C. Third
D. Fourth

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XII-1,2,3,4,
5,6,7,8

UNIT XII TEST

THE EXCEPTIONAL CHILD

Select the letter of the phrase which correctly completes the statement. Choose only one answer for each item.

1. Which of the following does not provide education and training for exceptional children?
   A. Diagnostic clinic
   B. Day activity center
   C. State school

2. One of the main reasons parents send their handicapped child to a special training center is to
   A. teach him to read and write.
   B. provide experiences for him to develop as much personal independence in self-care as possible.
   C. allow him more freedom with fewer rules.

3. According to Bensberg, a child with mental retardation
   A. loves attention and behaves like a younger child.
   B. is very talkative and worries about many things.
   C. is withdrawn and fearful of people.

4. Mental retardation may affect the child before he is born as a result of
   A. glandular imbalance in the child.
   B. German measles.
   C. inherited emotional problems.

5. During the birth process, the child would most likely be affected with mental retardation as a result of
   A. lack of oxygen supply to the infant's brain.
   B. poor nutrition.
   C. incompatability of genes.

6. Three common factors which cause mental retardation in the early years of a child's life are
   A. injuries, glandular imbalance, childhood diseases.
   B. injuries, incompatability of genes, unusual stress.
   C. German measles, Rh-factor, emotional problems.

7. Jackie is dwarflike and walks with shuffling movements. He is probably a
   A. Mongoloid.
   B. cretin.
   C. microcephalic.

8. Kathy has an abnormally large head due to a collection of cerebrospinal fluid. She has
   A. cerebral palsy.
   B. microcephalus.
   C. hydrocephalus.

9. The children at Barbara's training station are mentally retarded. Which of the following would be most characteristic of these children?
   A. They have no other disabling conditions.
   B. They are overdeveloped physically with normal motor control and coordination.
   C. They are slow to learn abstract ideas.

10. To be successful in working with mentally retarded children, a child care aide must be able to
   A. play a musical instrument.
   B. accept the child's limited ability.
   C. work with children in large groups.

11. Connie was concerned about the behavior of one of the children so she
   A. asked the child's mother to keep him home for a few days.
   B. tried to get him to participate in the music activities.
   C. asked the supervisor about any special problems he might have.

12. One of the main responsibilities of the child care aide is to
   A. assist the mentally retarded child in learning desirable behavior.
   B. explain to the children the rules of the center.
   C. discipline the children to prevent accidents.

13. To work effectively with the professional staff, the child care aide should know
   A. the child's IQ.
   B. the results of all tests which the child has taken.
   C. the kinds of information found in the child's folder.

14. The chronological age is the
   A. ability level of the child.
   B. actual age of the child.
   C. mental age of the child.

15. Adaptive behavior is
   A. being able to live adequately within the environment.
   B. changing behavior to be acceptable.
   C. accepting oneself as he is.

16. Positive reinforcements used as behavior shaping techniques with mentally retarded children are
   A. prizes given before the activity to motivate the child.
   B. candies given immediately after the activity to reward achievement.
   C. toys given at the end of the day when the child is ready to go home.

XII-1,2,3,4,
5,6,7,8

17. In teaching self-care skills to mentally retarded children, it is important to let them learn
    A. one step at a time.
    B. several simple steps in sequence.
    C. all the steps involved in the tasks at one time.

18. Problems in language development of the mentally retarded are due mainly to
    A. delayed speech.
    B. voice disorders.
    C. stuttering.

In questions 19-23, select the type of disabling condition which best fits each description.

DESCRIPTION

19. Jimmy's mental development is slow.
20. Johnny is crippled and must walk with braces.
21. Linda cannot see.
22. Connie is hard of hearing.
23. Jimmy has a speech defect, crossed eyes, and walks with a limp.

TYPE OF HANDICAP

A. Auditorially impaired
B. Emotionally disturbed
C. Mentally retarded
D. Multiply handicapped
E. Physically handicapped
F. Visually impaired

Select the term that best corresponds with the definitions given in numbers 24-31.

DEFINITIONS

24. Learns academic subjects to third or fourth grade
25. Is completely dependent
26. Can learn only basic self-care
27. Learns to handle simple jobs and becomes employable
28. Needs supervised or sheltered situation when performing simple tasks
29. Can learn to live independently
30. Commonly called educable
31. Commonly called trainable

TERMS

A. Mildly retarded
B. Moderately retarded
C. Severely retarded
D. Profoundly retarded

Ruth, the child care aide, is observing the mentally retarded children at the training station where she is employed. She hopes their behavior will give her clues to the kinds of activities she needs to plan. In questions 32-35, help Ruth select the best type of activity for each child.

SITUATION

32. Joe lacks coordination and needs to develop better body balance.
33. Kathy appears tense and needs self-satisfaction from making something useful.
34. Connie knows little about the world in which she lives and is unable to adjust to her surroundings.
35. Betty rocks and drums her fingers on the table.

TYPE OF ACTIVITY

A. Art and crafts
B. Motor skill
C. Music
D. Science and nature
E. Story time

ANSWER KEYS
FOR
UNIT TESTS

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I-1,2,3

Answer Key
for
UNIT I TEST

WHAT IS A CHILD CARE AIDE?

1. B
2. C
3. B
4. A
5. A
6. C
7. B
8. D
9. B
10. A

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II-1,2,3

Answer Key
for
UNIT II TEST

THE CHILD CARE AIDE: A MEMBER OF THE TEAM

1. C
2. B
3. C
4. C
5. A
6. B
7. E
8. B
9. B
10. A
11. A
12. B
13. A
14. B
15. B

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Answer Key
for
UNIT III TEST

THE CHILD AND HIS FAMILY

1. B
2. B
3. C
4. A
5. C
6. C
7. A
8. C
9. B
10. A
11. B
12. A

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IV-1,2,3,
4,5,6

Answer Key
for
UNIT IV TEST

THE CHILD IN A CHILD CARE CENTER

1. B
2. C
3. A
4. C
5. C
6. A
7. A
8. C
9. B
10. C
11. A
12. B
13. A
14. B
15. A
16. C
17. B
18. A
19. C
20. B
21. C
22. A
23. C
24. A
25. B
26. B
27. A
28. B
29. B
30. A
31. A

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V-1,2,3,
4,5,6

Answer Key
for
UNIT V TEST

CHILDREN'S FOOD AND EATING HABITS

1. A
2. C
3. B
4. A
5. C
6. B
7. C
8. A
9. B
10. A
11. C
12. C
13. A
14. C
15. D
16. A
17. B
18. B
19. A
20. A
21. B
22. B
23. A
24. B
25. B
26. A
27. A
28. A
29. A
30. B
31. B
32. A

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Answer Key
for
UNIT VI TEST

CHILDREN'S PLAY: A LEARNING EXPERIENCE

1. B
2. C
3. B
4. A
5. C
6. A
7. C
8. B
9. A
10. C
11. A
12. D
13. E
14. A

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VII-1,2

Answer Key
for
UNIT VII TEST

BOOKS AND MUSIC FOR CHILDREN

1. A
2. B
3. A
4. B
5. C
6. C
7. A
8. B
9. B
10. A
11. B
12. B

Answer Key
for
UNIT VIII TEST

TOYS AND GAMES FOR CHILDREN

1. A
2. C
3. A
4. C
5. B
6. C
7. A
8. B
9. A
10. C

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Answer Key
for
UNIT IX TEST

NATURE AND SCIENCE EXPERIENCES

1. C
2. A
3. A
4. B
5. A

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X-1,2

Answer Key
for
UNIT X TEST

HEALTH AND SAFETY

1. C
2. B
3. A
4. C
5. B
6. A
7. C
8. A
9. B
10. A
11. A
12. A

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XI-1,2,3,4,
5,6,7,8,9

Answer Key
for
UNIT XI TEST

INFANT CARE

1. A
2. C
3. B
4. C
5. B
6. B
7. A
8. A
9. B
10. C
11. B
12. C
13. B
14. C
15. C
16. A
17. B
18. A
19. B
20. A
21. B
22. B
23. B
24. C
25. A
26. A
27. A
28. B
29. B
30. C
31. A
32. B
33. B
34. A
35. A
36. B
37. C
38. B
39. E
40. A
41. D
42. B
43. A
44. D
45. C

Answer Key
for
UNIT XII

THE EXCEPTIONAL CHILD

1. A
2. B
3. A
4. B
5. A
6. A
7. B
8. C
9. C
10. B
11. C
12. A
13. C
14. B
15. A
16. B
17. A
18. A
19. C
20. E
21. F

22. A

23. D

24. A

25. D

26. C

27. A

28. B

29. A

30. A

31. B, C

32. B

33. A

34. D

35. C

REFERENCES REQUIRED
FOR USE WITH
INSTRUCTIONAL MATERIALS

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REFERENCES REQUIRED FOR USE WITH INSTRUCTIONAL MATERIALS

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REFERENCES REQUIRED FOR USE WITH INSTRUCTIONAL MATERIALS FOR CHILD CARE AIDE

	UNITS											
	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII
BOOKS: Bensberg. Teaching the Mentally Retarded.												X
Bradley, et al. The Child's Small World.				X								
Brisbane. The Developing Child.			X								X	
Green, et al. A Nursery School Handbook for Teachers and Parents.		X	X	X								
Heffernan, et al. The Years Before School.		X				X	X		X	X		

	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII
Leeper, et al. Good Schools for Young Children.	X					X	X					X
Perry. Teaching the Mentally Retarded.												X
Read. The Nursery School, A Human Relationship Laboratory.				X	X	X						
______. Recreation and Physical Activity for the Mentally Retarded.												X
______. Recreation for the Mentally Retarded.												X
PAMPHLETS: Feeding Little Folks.					X							
Home Nursing.											X	
A Guide for First Aid and Emergency Care.										X		

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	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII
Minimum Rules and Regulations for Operation of a Commercial Day Care Center.	X											
Summary of Communicable Diseases Common Among Children.												
Infant Care.											X	